Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: \_ B. WING MHL095-020 07/25/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **364 KELLWOOD DRIVE KELLWOOD GROUP HOME BOONE, NC 28607** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual survey was completed on 7/25/24. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G ,5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 and currently has a census of 5. The survey sample consisted of an audit of 3 current clients. V 736 27G .0303(c) Facility and Grounds Maintenance V 736 10A NCAC 27G .0303 LOCATION AND **EXTERIOR REQUIREMENTS** This group home is owned by the Arc of North (c) Each facility and its grounds shall be Carolina through agreement with HUD and maintained in a safe, clean, attractive and orderly Watauga Opportunities Inc. Watauga Opportunities manner and shall be kept free from offensive and the residents lease it from them. odor. Watauga Opportunities Inc. Residential Director has maintained contact with This Rule is not met as evidenced by: multiple property management Based on observation, record review and representatives through the Arc since interviews, the facility was not maintained in a 2022 regarding issues with the resident safe, clean, attractive and orderly manner. The bathroom and fixtures at this home. findings are: There has been conversation back and forth about getting permission to get Observation on 7/23/24 at approximately 2pm quotes for renovations, as well as long revealed: pauses in progress on the matter due -Bathroom #1 had roll-in shower approximately 3 to staff turnover or budgeting feet by 4 feet with drain in center of floor and with restrictions within the Arc. On 6/18/24, shower curtain. Brown and black stains were we provided the Arc with a guote from present on 3 walls approximately 1 foot up the a local contractor to renovate both wall and more than 2 feet high in a few places. resident bathrooms. We have sent The same stains appeared in the corners where multiple photos of the issues as well as the wall and floor meet and extending 2-3 inches two different Arc inspectors noting the on the floor in places. Heavy staining continued extent of the issues on their reports. At on the wall and underneath the wall-attached this point, we have received no shower seat. Black and brown staining was feedback from the Arc on how to especially heavy on the floor at the entrance of Division of Health Service Regulation

STATE FORM

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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3/7/24

(X6) DATE

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: \_\_ B. WING MHL095-020 07/25/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 364 KELLWOOD DRIVE KELLWOOD GROUP HOME **BOONE, NC 28607** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) V 736 Continued From page 1 V 736 proceed as the last update was that the shower as the floor tiles meet the edge of the Director of Housing was looking bathroom flooring of luxury vinyl plank (LVP). for funding options after we had There was no threshold between the 1/4 -1/2 inch re-sent them quote information on lip from the shower tiles and the LVP. Just 6/18/24 prior to the DHSR audit on outside the shower, floor molding approximately 7/25/24. We have forwarded the 4-5 inch high by 7-8 inch long, was heavily DHSR deficiency report to the Arc of chalked and also stained black and brown. This North Carolina and continue to await molding butted up to the metal door jam which a response from them on if we can was rusted, peeling and had a half inch open gap proceed with the renovations that are an inch off the floor. The ceiling vent, needed as they own the home, and approximately 5 by 10 inches was rusted, peeling all approvals have to be made by paint and had black growth around and through them. Once renovations and funds the vertical blades. The inside metal door jam are approved by the Arc, we will had spots of peeling paint. proceed with the bathroom -Bathroom #2 had a bathtub with black and brown renovations as quickly as possible. staining in the caulking around the lip of the tub across the front below the water access point and 34 of the wall side. The 4 by 4-inch tiles on the wall had black stains in grout lines across the front and 3/4 down the wall side of the tub about 1 foot high. A dark 4-inch-wide stain was inside the tub above the drain and approximately 1 foot down each side. The pedestal sink was worn and rusted around the drain and overflow. Record review on 7/23/24 of County Health Department review of facility on 12/18/23 -"Observed the calking around the tub and sinks to be worn. Repair/re-chalk the floor wall junction by the walk-in shower. New floors were added in bathroom 1 and were not sealed where they meet roll in shower. Shower chair, toilets, bathtub and shower need to be cleaned ... Cleaning is needed on walls under sinks and around toilets in bathrooms ...Repair door jambs to bathroom where rusted and repair chipping paint in restrooms. Observed microbial growth on walls and ceiling in bathroom 1 ... Repair rusted vent on ceiling in this restroom ..."

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Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: \_ B. WING MHL095-020 07/25/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 364 KELLWOOD DRIVE **KELLWOOD GROUP HOME BOONE, NC 28607** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) V 736 V 736 Continued From page 2 Interview on 7/24/24 with Client #1 revealed: -His chores were to clean the bathroom and mop and dust. -"The floor gets really slippery when its wet ...Somebody needs to come redo that tile." Interview on 7/24/24 with Client #3 revealed: -She took showers. "The shower and the tub do not bother me at all." Interview on 7/23/24 with Staff #1 revealed: -Never had the clients complain about the bathrooms. -"We have bleached and scrubbed everything but it's still stained." Interview on 7/24/24 with Staff #2 revealed: -LVP was put in the living room, hallways, 1 bedroom and both bathrooms. -Had not noticed any buckling or bowing in the LVP in the bathrooms. Interview on 7/23/24 with the Residential Director revealed: -LVP was put in both bathrooms on top of the floor tiles. -The health department cited issues with the bathrooms in December 2023. -Had been pleading with the state-wide property management agency to authorize repairs to both bathrooms since December 2023. -Have gotten estimates for the repairs and submitted to property management with no response from them.

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