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: R B. WING MHL091-075 09/26/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 2636 WARRENTON ROAD P & W GROUP HOMES HENDERSON, NC 27537 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE PRFFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual and follow up survey was completed on 9/26/24. 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 5 and currently has a census of 3. The survey sample consisted of audits of 3 current clients. V 736 27G .0303(c) Facility and Grounds Maintenance V 736 Bathroom will be deep cleaned to 10A NCAC 27G .0303 LOCATION AND remove black substance along EXTERIOR REQUIREMENTS the top of the shower wall, in the (c) Each facility and its grounds shall be grout of the shower, around the floor maintained in a safe, clean, attractive and orderly of the shower/bathroom and manner and shall be kept free from offensive 11/01/24 throughout the grooves of the tile odor. inside the shower. Once deep cleaning is completed, the missiing This Rule is not met as evidenced by: tile inside the shower will be replaced Based on observation and interview the facility and whole bathroom will be painted. was not maintained in a safe, clean and attractive Maintenance will do weekly checks manner. The findings are: deep clean as needed, to avoid future build up. Observation on 9/26/24 at 12:10 PM of client bathroom revealed: -Black substance throughout the grooves of the tile in the shower. -Black stained substance along top of the shower -A 4 x 4 tile block missing in the shower. RECEIVED -Black substance throughout grout in the shower and along the floor. HUT 04 2024 Interview on 9/26/24 the Qualified Professional stated: **DHSR-MH Licensure** Sect

Division of Health Service Regulation

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

-The construction section had mentioned the black substance last time they came out.

Keenan A. Wynn

- ST CARC

TITLE

(X6) DATE

Clinical Director QP BS

If continuation sheet 1 of 2

FORM APPROVED Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: \_\_ R B. WING MHL091-075 09/26/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 2636 WARRENTON ROAD P & W GROUP HOMES HENDERSON, NC 27537 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE DATE PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) V 736 V 736 Continued From page 1 -Thinks some of the black substance is stained. -Needed to paint the bathroom and deep clean.

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