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V 000	INITIAL COMMENTS A limited follow-up survey for the Type A2 was completed on 12/16/24. This was a limited follow up survey, only 10A NCAC 27G .0207 Emergency Plans and Supplies, 10A NCAC 27G .5602 Staff, and cross-referenced into 10A NCAC 27G .5601 Supervised Living for All Disability Groups were reviewed for compliance. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 4 and has a current census of 4. The survey sample consisted of audits of 4 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes. (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use.	V 114		

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This Rule is not met as evidenced by:
Based on record review, observation and interview, the facility failed to document fire and disaster drills which simulated fire emergencies. The findings are:

Review on 12/12/24 of Client #1's record revealed:
-Admission date of 6/2/19.
-Diagnoses of Moderate Intellectual Developmental Disability (IDD), Hemiplegia-unspecified, Alopecia areata, Chronic leukemia-unspecified cell type, Discoid lupus erythematous of eyelid, Epilepsy and recurrent seizures.

Review on 12/12/24 of Client #1's 12/1/24 treatment plan revealed:
-Client #1 was non-ambulatory and no longer able to bear weight on her legs.
-She "needs full supports for positioning and transfers."

Review on 12/12/24 of Client #2's record revealed:
-Admission date of 11/25/23.
-Diagnoses of Autistic Disorder, Obsessive Compulsive Disorder, and anxiety disorder.

Review on 12/12/24 of Client #3's record revealed:
-Admission date of 12/18/23.
-Diagnoses of Mild IDD, Cerebral Palsy, Epilepsy, Depressive Disorder, Dysthymic Disorder, Enuresis, Encopresis and Congenital

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Quadriplegia.
-No change in her 2/1/24 treatment plan which revealed:
-Client #3 continued to be non-ambulatory.

Review on 12/12/24 of Client #4's record revealed:
-Admission date of 11/1/11.
-Diagnoses of Mild IDD, Depressive Disorder, Mood Disorder (hyperactive impulse) and seizure disorder.

Review on 12/12/24 of the fire and disaster drill log revealed:
-No documentation of fire and disaster drills conducted from November 6, 2024 through December 16, 2024.

Observation on 12/11/24 at 3:01 pm of the back exterior of the facility revealed:
-On the left side was a wooden deck with approximately 6 steps which led to Client #1's bedroom.

Interview on 12/11/24 with Client #1 revealed:
-She identified her bedroom as "the one I've always been in."
-"We have done it (drills) a couple of times ...a month or week or so ago."
-"I went outside with my chair and we (Clients #1-#4) went to the rear of the building (a building at the top of the driveway)."
-Staff #2 helped her into her wheelchair and "rolled" her outside for the fire drill.
-"We did a hurricane and a tornado drill. I went in my chair in the hallway with the others (Clients #2- #4)."
-"[Director] is here when we do it (drills)."

Interview on 12/11/24 with Client #2 revealed:

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-"Maybe sometimes we go outside (for fire drills). I go, [Client #1], [Client #3] and [Client #4]."
-"Maybe sometime last month," in response to when she and the other clients went outside for a fire drill.
-"Sometimes we go in hallway for other drills (tornado, hurricane drills)."

Interview on 12/11/24 with Client #3 revealed:
-"We now do fire and disaster drills."
-"[Director] came early and helped me and [Client #1] in our chairs and we went outside. We went outside anyway to get on the van (for transport to the day program)."
-"No fire drills at night. I don't see how this would be realistic at nighttime. We are in bed asleep."
-"We do that (tornado drills) in the daytime too. They (the Director and staff on shift) line us up in the hallway and close every door."
-She could not remember the type or date of the last drill she practiced.

Interview on 12/11/24 with Client #4 revealed:
-Client #1 and Client #3 were going outside with her and Client #4 for fire drills.
-"[Director] and whatever staff was working" put all of them (her, Client #1, Client #3 and Client #4) in the (facility) hallway during tornado drills.
-Could not provide a date or an approximate time when she participated in the last fire and disaster drills.

Interview on 12/12/24 with Staff #1 revealed:
-She continued to work 3rd shift from 11:30 pm-7:30 am.
-"There's not usually another staff who works with me on shift. If there's a problem, I call [Director]."
-"I do not do fire drills at 11:30 at night."
-"We do them (fire drills) in the mornings. [Director] comes in of the mornings to help me

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V 114	Continued From page 4 get everyone ready for their day and we do the drills then. I'm not going to wake the ladies (clients) up during the night." -The Director conducted fire and disaster drill training with her and Staff #2. "We went through different scenarios what we would do for each drill. We pushed the button on the alarm, knocked on everyone's door, told [Client #2] and [Client #4] where to meet outside, then we went back (inside) to [Client #1] and [Client #3]. We didn't pull them (Client #1 and Client #3) outside because it was too cold." Interview on 12/13/24 with Staff #2 revealed: -Her usual work hours are Mondays and Tuesdays from 3:30 pm-11:30 pm (2nd shift). On Saturdays and Sundays, she worked from 7:30 am-3:30 pm (1st shift). -The Director conducted fire and disaster training with her and Staff #1. -Since the last survey (10/14/24) for fire drills, "I get [Client #2] and [Client #4] out first and tell them to go to the designated place (the building at end of the driveway). Then I come inside and get [Client #1] and [Client #3] in their wheelchairs and take them through the kitchen into the large living room and out the door." -" ...[Client #1] can be easy to transfer but we have to do everything (lifting and transferring with mechanical lift) for [Client #3] and it's a little difficult because we're in a rush to get everyone out." -The last time she and the Director conducted a fire drill and a disaster drill was one weekend in October 2024 around 10:30 am-11:30 am. -The Director was there (at the facility) for every fire and disaster drill. -For tornado drills, she and the Director "get all the clients (Clients #1- #4) into the hallway and have them turn toward the wall."	V 114		

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V 114	Continued From page 5 Interviews on 12/11/24, 12/12/24 and 12/16/24 with the Director revealed: -"I have done the fire and disaster drills where they (the drills) are physically simulated and the fire and natural disaster drills have been done on every shift." -3rd shift operated from 11:30 pm- 7:30 am and a fire and disaster drill were run on 3rd shift in the morning hours (7:00 am for fire drill and 7:20 am for a tornado drill on 10/16/24). -She ran a fire drill first and then ran a tornado drill on all shifts. -"I press the (alarm) button and a 2nd staff is with me. We let the ambulatory clients (Clients #2 and #4) go outside first and then I get [Client #1] and [Client #3] up." -"I talked to each participant (client) about what they should do in a real fire. [Client #4] is to go to the neighbor's house and have 911 called. I know we should call 911 ourselves." -"Once we are back in the house (facility) from a fire drill, we simulate a tornado drill." -"[Client #1] and [Client #3] are both participating in the fire and disaster drills. They were taken outside with the fire drills." -"I did one per shift per quarter," in response to no documentation of fire and disaster drills conducted on the weekend shifts. -"I thought I had corrected the fire and disaster drills by holding a drill for each shift during the 4th quarter." -She provided training to her staff in October 2024 on the fire and disaster drills, and they (she and Staff #1 and Staff #2) practiced the drills on the weekend shifts. -She provided no additional documentation of fire and disaster drills conducted from 11/6/24 through 12/16/24.	V 114		

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V 114	Continued From page 6 This deficiency is cross-referenced into 10A NCAC 27G .5601 (V289) for a continuing Type A2 rule violation originally cited for failure to correct within 23 days.	V 114		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have	V 289		

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V 289	Continued From page 7 other diagnoses; (5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or (6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7)(A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1)(i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e)(1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL). This Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide services to meet the needs of the clients (Clients #1, #2, #3 and #4). The findings are: Cross Reference: 10A NCAC 27G .0207 Emergency Plans and Supplies (V114). Based on	V 289		

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record review, observation and interview, the facility failed to document fire and disaster drills which simulated fire emergencies.

Cross Reference: 10A NCAC 27G. 5602 Staffing (V290). Based on record review and interview, the facility failed to ensure staffing to enable staff to respond to the individualized client needs for 2 of 3 audited clients (Clients #1 and #3).

Review on 12/11/24 of the facility's 2024 license with the North Carolina Division of Health Service Regulation (DHSR) revealed:
-The facility was licensed for 4 clients with 4 ambulatory and 0 non-ambulatory clients.

Interview on 12/11/24 with the Director revealed:
-"I did (submitted) a change in my license to the State (DHSR) to represent I had non-ambulatory clients..."
-"Then someone from (DHSR) Construction called me after I submitted the change form and he got someone from (DHSR) Licensing who could not give me information. Construction said I had to have sprinklers throughout the house (facility) as well as fire walls and solid wood doors or have the person (Client #3) moved out."
-"I don't remember who (names) I talked to in Construction and Licensing."
-"I told him (in DHSR Construction) the situation and he said either way, I was out of compliance, and I could not fill [Client #3]'s place (after Client #3's discharge)."
-"I can't throw [Client #3] out and I can't put sprinklers in place."
-Client #3's discharge was scheduled for 12/20/24 to another facility.

Interview on 12/11/24 with the Facility Owner #1

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V 289	Continued From page 9 revealed: -"We thought about putting up a ramp outside [Client #1]'s door but there would still have to be steps involved to get it to ground level." -"Someone at the State tried to explain (to the Director) we can't have 2 non-ambulatory people here (at the facility) unless there's sprinklers, fire walls and solid doors put in." -"We can't afford that (the cost of the materials and installation). We can't afford to pay for 2 staff on every shift so we're trying hard to get 1 (client) out." -"We understand the situation. It's where we're at." Review on 12/12/24 of a Plan of Protection completed on 12/12/24 and signed on 12/16/24 by the Director revealed: "What immediate action will the facility take to ensure the safety of the consumers in your care? -M&S Supervised Living LLC will conduct fire and disaster drills on each shift at least quarterly. The drills will be conducted under conditions that simulate fire emergencies. Client #1-4 will be included in all drills. Describe your plans to make sure the above happens. -The fire and disaster drills will take place on all shifts and are documented accordingly. Staff as well as clients will initial participation." Review on 12/12/24 of amended Plan of Protection #1 completed on 12/12/24 and signed on 12/16/24 by the Director revealed: "What immediate action will the facility take to ensure the safety of the consumers in your care? - M&S Supervised Living LLC (Licensee) will continue to have 2 staff on premises to help with fire and disaster drills and individualized client	V 289		

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V 289	Continued From page 10 needs for the next 30 days, after discharge on 1 non-ambulatory client, M&S will return to 1 staff person during drills." Review on 12/13/24 of an amended Plan of Protection #2 completed and signed on 12/13/24 by the Director revealed: "What immediate action will the facility take to ensure the safety of the consumers in your care? -The following outlines the facilities POP and describes the plans to ensure the safety of the residents. -To ensure the safety of the consumers in care, M&S Supervised Living LLC will: -Per the rule, 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES -Develop a written fire plan for the facility and an area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. -The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. -Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. [A quarter is a three-month period on a company's calendar] Drills shall be conducted under conditions that simulate fire emergencies. -The facility shall have basic first aid supplies accessible for use. -All persons on-site [This may include but is not limited to, staff, residents, and visitors] at the time of the drill will participate. Documentation will be kept on file to indicate, the type of drill conducted, the time, the shift, and the number of participants during the drill. -Please note the agency is currently in its fourth quarter. Additional drills will be conducted before the 2025 Q1	V 289		

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V 289	Continued From page 11 -January, February, and March (Q1) -April, May, and June (Q2) -July, August, and September (Q3) -October, November, and December (Q4) Describe your plans to make sure the above happens. -M&S Supervised Living LLC will: -Per the rule, 10A NCAC 27G .5602 STAFF -Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c), and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. -M&S Supervised Living LLC will assess the individual residents' needs during intake and ongoing throughout the duration of the residency. - A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. -M&S will change the current policy from checking on residents every 2 hours to hourly checks on all residents throughout each shift to ensure the safety and well-being of residents." The facility served clients with diagnoses including Mild to Moderate Intellectual Developmental Disability, Autism, Lupus, Seizure Disorder, Encephalopathy, Cerebral Palsy, and Quadriplegia. 2 of the 4 clients were non-ambulatory and required hands-on assistance with their transfers in and out of bed and to and from their wheelchairs. During the weekdays, 1 staff worked the 3rd shift from 11:30	V 289		

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V 289	Continued From page 12 pm until 7:30 am. The Director arrived at the facility around 7:30 am as a 1st shift staff with the 3rd shift staff staying over to help the Director get the 4 clients ready to be transported to their day program. When the 4 clients returned from their day program, there were 2-3 staff present at the facility for 2nd shift with the Director working as the 2nd or 3rd staff. No fire and disaster drills were conducted during the night hours after clients (Clients #1- #4) were asleep in bed. The fire drills were initiated with verbal prompts to the 2 ambulatory clients (Clients #2 and #4) by the Director and assigned shift staff to go to the designated outdoor meeting place. The 2 non-ambulatory clients (Clients #1 and #3) were then physically assisted by the Director and staff in getting out of their beds and into their wheelchairs to go outdoors. Client #1's bedroom had a door that led to the exterior of the facility with a wooden deck and about 6 steps to ground level which obstructed a path for emergency egress. No structural modifications were planned by the Facility Owner and Director to increase client safety in the event of an actual emergency. There was no documentation from 11/6/24-12/16/24 of fire and disaster drills having been documented. This deficiency constitutes a Continuing Type A2 rule violation originally cited for substantial risk of serious harm for failure to correct within 23 days.	V 289		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client	V 290		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL0411101	A. BUILDING: _____ B. WING _____	R 12/16/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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V 290	Continued From page 13 needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body. (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.	V 290		

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V 290	Continued From page 14 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure staffing to enable staff to respond to the individualized client needs for 2 of 3 audited clients (Clients #1 and #3). The findings are: Review on 12/12/24 of Client #1's record revealed: -Admission date of 6/2/19. -Diagnoses of Moderate Intellectual Developmental Disability (IDD), Hemiplegia-unspecified, Alopecia areata, Chronic leukemia-unspecified cell type, Discoid lupus erythematous of eyelid, Epilepsy and recurrent seizures. -12/1/24 updated treatment plan revealed: -"[Client #1] continues to require a high level of full and partial supports. She is no longer able to walk or bear weight on her legs. Client #1 needs full supports for positioning and transfers." -"[Client #1]'s stander (an assistive device to help an individual stand in an upright position and bear weight) does not meet her transfer needs. It still requires 2 people to use it and Client #1 is fearful of the sling and does not want to be placed in it." Review on 12/12/24 of Client #3's record revealed: -Admission date of 12/18/23. -Diagnoses of Mild IDD, Cerebral Palsy, Epilepsy, Depressive Disorder, Dysthymic Disorder, Enuresis, Encopresis and Congenital Quadriplegia.	V 290		

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V 290	Continued From page 15 -Written 60-day discharge notice dated 10/15/24 which revealed: -Client #3 "does not feel safe in her current residence (facility), and the Licensee was making "some changes to better serve non ambulatory individuals, but feels it is the best interest of the client (Client #3) and company to move forward with this discharge to ensure all of [Client #3]'s needs can be met to her satisfaction." -No change in her 2/1/24 treatment plan which revealed: -Client #3 was non-ambulatory. -"Extensive supports needed for (Client #3)'s lifts and transfers; uses a hoyer (lift) at day program and at home, 2:1 (staff to client ratio) is preferred especially if transitioning from one area to another ...". Due to client's limitations, she requires hands-on support and physical assist with completion of self-help and daily living tasks. She requires physical assist w/ turning, repositioning and toileting on a daily basis." Interview on 12/11/24 with Client #1 revealed: -When she woke up in the mornings, there were 2 staff at the facility, a 3rd shift staff and 1st shift staff. -"The one on 1st shift gets me up in the mornings. I go to bed around 8:00 (pm) and [Director] and Staff #3 are here." -She did not want to use a (mechanical) lift to be assisted by staff with getting into and out of her bed. -(Director) transferred her to and from her wheelchair and bed by holding her around her body. Interview on 12/11/24 with Client #3 revealed: -1 staff was at the facility at bedtime "because everyone is in bed." -In the mornings, Staff #1 was the only staff at the	V 290		

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V 290	Continued From page 16	V 290		

facility until the Director came in and helped her and Client #1 get up out of bed and ready (dressed) to go to the day program.
-" ...realistically it don't matter how many staff are here if there's a fire. I'm going to always have that reservation, an honest fear, about can they (staff) get to me in time and what are we (she and Client #1) going to do in case of a fire. They (Director and staff) do the best they can and it doesn't matter how many staff are here."

Interview on 12/12/24 with Staff #1 revealed:
-She worked as awake staff on 3rd shift at the facility from 11:30 pm- 7 am during the weeknights and worked some Saturdays and Sundays on this same shift.
-"There's not usually another staff who works with me on shift. If there's a problem, I call [Director]."
-She checked in 2-3 times on Clients #1- #4 during the night.
-If Client #3 needed to be changed during the night, Client #3 called her for assistance.
-In the weekday mornings, the Director relieved her from her shift around 7:30 am and Staff #2 or Staff #3 relieved her on weekend mornings.
-She and Staff #2 continued to receive training from the Director on the mechanical lift. "... I'm trying to get the feel of it. I want to be familiar with it and I want the client (Client #3) to feel comfortable with me using it."

Interview on 12/13/24 with Staff #2 revealed:
-She worked 2nd shift (3:30 pm -11:30 pm) on Mondays and Tuesdays and 1st shift (7:30 am-3:30 pm) on Saturdays and Sundays.
-"There's no two people (staff) on the entire shift all the time" and "On Saturdays and Sundays, [Director] is there (at the facility) all day long."
-During the weekdays when the clients (Clients #1- #4) returned to the facility from the day

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program around 4:00 pm, she and the Director placed Client #1 and Client #3 in their beds.
-"There's no more getting her (Client #1) up once she's home from the day program and in bed."
-"[Client #3] may have gotten up from bed one time after she came home from the day program."
-She helped Client #1 get up and out of bed on Saturdays and Sundays "but her and [Client #3] like to stay in bed and watch TV.
-"If I need help with [Client #1] or [Client #3], I can call [Director] and she will be there to help."
-She had received training from the Director on the mechanical lift.
-"I am familiar with it (mechanical lift) but have not used it for years. I use the lift on [Client #3] because she's so heavy."
-"I'm still training (with the Director) on the (mechanical) lift."

Interview on 12/13/24 with Staff #3 revealed:
-She worked 2nd shift (3:30 pm- 11:30 pm) during the weekdays and worked 2nd shift every other weekend.
-Usually, the Director or Facility Owner #1 was with her when she worked her shifts.
-She was learning from the Director how to use the mechanical lift with Client #3.
-She had been shown by the Director how to use a transfer board for Client #1 to get in and out of bed.

Interviews on 12/12/24 and 12/16/24 with the Director revealed:
-She provided a 60-day discharge notice on October 15, 2024 to Client #3 and Client #3's treatment team because "I do not want a client to feel like they're unsafe here (at the facility)."
-Staffing (the facility) was a "struggle, trying to make sure 2 people (staff) are here and it's

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V 290	Continued From page 18 usually me here. It's hard." -"It's hard to commit to 2 staff every shift." -"I will have staff stay at the facility a little longer to help with the needs of the clients (Clients #1-#4) but they know I don't pay overtime." -Client #1 was easier to transfer in to and out of bed with a transfer board and staff assistance. -Client #1 was unable to stand up using her mechanical stander. -Client #3 was lifted and assisted with transfers using a mechanical lift and staff assistance. -Facility Owner #1 came to the facility to help her and the direct care staff with cooking, laying client's clothing out to wear the following day, and to "help everyone get set up" when Clients #1- #4 return from the day program; however, the Facility Owner was not staff and was not at the facility for an entire shift. Interview on 12/11/24 with the Facility Owner #1 revealed: -"I'm not staff" and introduced herself as the Facility Owner and mother of the Director. -"I help out now and then. I came today to get the walker out (for Client #4) and set everything up with the (dinner) meal and whatever else is needed. The ladies (clients) are on their way here (to the facility) from the day program." -"We can't afford to pay for 2 staff on every shift." This deficiency is cross-referenced into 10A NCAC 27G .5601 (V289) for a continuing Type A2 rule violation originally cited for failure to correct within 23 days.	V 290		