PRINTED: 02/04/2025 FORM APPROVED

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: MHL043-075 B. WING 01/28/2025 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 808 NORTH MCKAY AVENUE HARMONY HOME **DUNN, NC 28334** SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE COMPLETE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual and follow up survey was completed RECEIVED on January 28, 2025. A deficiency was cited. FEB 1 8 2025 This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised DHSR-MH Licensure Sect Living for Adults with Developmental Disabilities. This facility is licensed for 6 and has a current census of 4. The survey sample consisted of audits of 3 current clients. V 736 27G .0303(c) Facility and Grounds Maintenance V 736 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interviews, the facility and its grounds were not maintained in a safe. clean, attractive and orderly manner. The findings Observation on 1/28/25 from 2:27pm -3:50pm revealed: - The kitchen cabinet under the sink was missing the door; there was greasy residue on the wall under the stove hood. - There were several holes in the wall behind the couch that were between 1 inch and 3 inch in size. - There were several dead bugs behind the tv in the living room. - The love seat had bottom cushions had dark stained and the right side arm was stained.

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

- Client #1's bedroom had a white powdered

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Management 2/14/2

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STATEMENT OF DEFICIENCIES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		PLE CONSTRUCTION	(X3) DATE S	
			A. BUILDING	j:	CONFL	EIED
MHL		MHL043-075	B. WING		R <b>01/28</b>	3/2025
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY,	STATE, ZIP CODE		
HARMO	NY HOME		TH MCKAY A C 28334	AVENUE FEB 1 8 2025		
(X4) ID PREFIX TAG	X (EACH DEFICIENCY MUST BE PRECEDED BY FULL		ID PREFIX TAG	PROVIDER'S PLAN DE CORRECTIO (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROP DEFICIENCY)	BE	(X5) COMPLETE DATE
	SUMMARY STATEMENT OF DEFICIENCIES  (EACH DEFICIENCY MUST BE PRECEDED BY FULL  REGULATORY OR LSC IDENTIFYING INFORMATION)			The facility will ensure that the ghome is maintained in such a malensure a safe, clean, attractive, or and an orderly environment throus implementation of cleaning, repart ongoing preventive maintenance monitoring.  Staff will complete work orders the address any repair needs noted.  The group home will be cleaned thoroughly to ensure that it is freed dirt, odor, stains and is maintaine attractive manner. Staff were in stand instructed to clean the walls, cabinets, bathrooms, windowsills bedrooms and in other areas or how items to ensure a clean environment. The kitchen cabinet door that was missing under the sink will be repair to the property of the wall believed to the walls are stove hood will be cleaned.  A technician will complete repair the home to include but not limite tholes in the wall behind the living couch, replace missing screw on restand drawer in Client #1's bedroom the walls are the home to include but not limite tholes in the wall behind the living couch, replace missing cabinet door under the sink, repair crack at botto door frame in the male hallway	e of d in an ervice  o 2/2  e of d in an ervice  o me ent.  solaced.  nd  rs of d to room night om, er m of	/27/25
vision of Hea	Ith Service Regulation			pathroom, and other such repair n	iccus.	

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				The rugs in the bathroom will replaced and staff are instructed the bathroom flooring and rugs	ed to keep		
				The dark stains in bottom of the under the tub mat on female site treated, cleaned for stains and	ne tub de will be		
				The cardboard TV box, washing machine and such items were of by maintenance technician and away from the facility grounds maintenance technician was insumoving forward to always take boxes, discarded items /materials such away from the facility grounds	liscarded taken . The formed such als as		
				RECEIV FEB 1 8 20 DHSR-MH Licensur	ED 025 e Sect		
STATEME	NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPL	E CONSTRUCTION	(X3) DATE SURVEY		
AND PLAN OF CORRECTION		IDENTIFICATION NUMBER:	A. BUILDING:		COMPLETED		
		MHL043-075	B. WING		R <b>01/28/2025</b>		
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE							
HARMO	NY HOME		TH MCKAY A IC 28334	VENUE			
	(EACH DEFICIENCY REGULATORY OR L alth Service Regulation	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPROPERTIES OF T	D BE COMPLETE		
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V 736 Continued From page 2 V 736 Staff will replace light bulbs in the bathrooms that are not working and will Interview on 1/28/25 staff #1 stated: complete work orders for any potential - She had worked since September 2024. repair needs that affect the lighting - She was unsure of what the white substance throughout the group home. 2/27/25 that was observed was but felt another staff may have used salt to deter bugs. All baseboards, hall bathrooms, floor Interview on 1/28/25 the Qualified Professional tiling, shoe molding, shower wall and stated: shower heads will be cleaned to remove - She was unsure what the whit substance was rust and stains, treated for mold, and/or but she would follow up with staff. painted or replaced, as necessary. Interview on 1/28/25 the Director of Quality 2/27/25 Management stated: Staff have cleaned windowsills in client - He was unsure of what the white powdered bedrooms and throughout the home to substance was but thought it was for bugs. include washing, dusting, and removing - Staff likely placed the white substance in the dead flies and bugs, which will be an areas observed and he would follow up with staff ongoing responsibility of staff to check about it. - He was unsure how the holes got in the wall all windowsills throughout the home to behind the couch but the facility would get it make sure cleanliness occurs ongoing. repaired. - He understood the facility was required to be 2/27/25 The staff was interviewed and admitted maintained in a safe, clean, attractive and orderly to dispensing the white powdery manner. substance throughout the group on This deficiency constitutes a re-cited deficiency identified areas such as cabinets in and must be corrected within 30 days. kitchen, sofa, client bedrooms etc. The staff was not instructed to apply the bug treatment. The staff was instructed and 2/27/25 thoroughly cleaned the powdery substance and removed it throughout the home. The staff will receive corrective action for applying such treatment without the approval of management. RECEIVED The living room love seat cushions and the family room sofa will be cleaned and kept clean of stains by staff in the 2/27/25 DHSR-MH Licensure Sect home. The QPs will conduct checks of the group home twice weekly to ensure that the facility is maintained in a safe. clean, and attractive manner.

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	The Director of Quality Management (DQM) will develop a monitoring tool to inspect the home to address potential safe, clean, and attractive needs.
	DQM will monitor weekly in the home to ensure continued compliance.
	RECEIVED FEB 18 2025 DHSR-MH Licensure Sect