

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL098-077	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 03/13/2025
NAME OF PROVIDER OR SUPPLIER THE WELLMAN CENTER 1		STREET ADDRESS, CITY, STATE, ZIP CODE 410 WEST GARNER STREET WILSON, NC 27893		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on March 13, 2025. Defenciecies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 9 and currently has a census of 8. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have a first aid kit accessible for use.</p>	V 114		

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

TITLE

(X6) DATE

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V 114	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to have disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 03/12/25 of facility records from April 2024 thru march 2025 revealed:</p> <ul style="list-style-type: none"> - No disaster drills documented during the 2nd shift (7pm to 7am) for the 2nd , 3rd and 4th quarters of 2024. <p>Interview on 03/13/25 client #3 stated:</p> <ul style="list-style-type: none"> - He had resided at the facility for approximately 4 or 5 years. - He had participated in disaster drills at the facility. <p>Interview on 03/13/25 client #4 stated:</p> <ul style="list-style-type: none"> - He had resided at the group home for many years. - He did not recall completing disaster drills. <p>Interview on 03/13/25 client #8 stated:</p> <ul style="list-style-type: none"> - He had not completed disaster drills at the facility. <p>Interview on 03/12/25 and 03/13/25 the Qualified Professional/Licensee stated:</p> <ul style="list-style-type: none"> - The facility had 2 shifts (7am to 7pm and 7pm to 7am). - The facility completed fire and disaster drills. - He would ensure all drills were documented on all shifts quarterly. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		
V 290	27G .5602 Supervised Living - Staff	V 290		

Division of Health Service Regulation

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V 290	Continued From page 2 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 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	V 290		

Division of Health Service Regulation

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V 290	<p>Continued From page 3</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to assess and document client's capability of having unsupervised time in the home and community for three of three audited clients (#3, #4 and #8). The findings are:</p> <p>Review on 03/12/25 of client #3's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 06/02/13. - Diagnoses of Schizophrenia, Anxiety and Hypertension. - "Unsupervised Time Assessment" completed 04/05/14. - Treatment plan dated 04/01/24. - Treatment plan indicated "up to 8 hours per day" of unsupervised time. - No current assessment to determine client #3's ability to remain in the community or the home without staff supervision. <p>Review on 03/12/25 of client #4's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 12/07/04. - Diagnoses of Schizophrenia, Asthma, Hypertension and Prostate Cancer. - "Unsupervised Time Assessment" completed 12/20/16. - Treatment plan dated 04/01/24. - Treatment plan indicated "up to 8 hours per day" 	V 290		

Division of Health Service Regulation

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V 290	<p>Continued From page 4</p> <p>of unsupervised time.</p> <ul style="list-style-type: none"> - No current assessment to determine client #4's ability to remain in the community or the home without staff supervision. <p>Review on 03/12/25 of client #8's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 06/20/05. - Diagnoses of Schizophrenia, Hypertension, Anxiety and Tobacco Abuse. - "Unsupervised Time Assessment" completed 01/02/20. - Treatment plan dated 04/01/24. - Treatment plan indicated "up to 8 hours per day" of unsupervised time. - No current assessment to determine client #8's ability to remain in the community or the home without staff supervision. <p>Interview on 03/13/25 client #3 stated:</p> <ul style="list-style-type: none"> - He had resided at the facility for 4 or 5 years. - He had no special goals. - He wanted to watch television. - He did not want to do anything else. <p>Interview on 03/13/25 client #4 stated:</p> <ul style="list-style-type: none"> - He was able to go to the store by himself. - He felt safe going to the store. - He was his own guardian. - He "liked to do his own thing" at the facility. <p>Interview on 03/13/25 client #8 stated:</p> <ul style="list-style-type: none"> - He was his own guardian and makes his own decisions. - He had 8 hours unsupervised time. - He felt safe walking to the store and other places. <p>Interview on 03/12/25 and 03/13/25 the Qualified Professional/Licensee stated:</p>	V 290		

Division of Health Service Regulation

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V 290	Continued From page 5 - The clients had various amounts of unsupervised time during the day. - He included the unsupervised time in the treatment plans. - He did not complete a yearly assessment to determine if a client was able to be unsupervised in the home or community. - He would reassess clients for unsupervised time if there was a change in the health or mental status. - He would reassess the clients yearly for unsupervised time and include primary care provider input. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 290		
V 736	27G .0303(c) Facility and Grounds Maintenance 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: Baaed on observation and interview the facility failed to ensure the home was maintained in a safe, clean, attractive manner. The findings are: Observation on 03/13/25 at approximately 10:00am revealed: -The carpet in the living room area was stained with a dark substance at the entrance of the side door of the facility. The steps leading into the kitchen the carpet was torn approximately 1/2 foot in size. -A smoke detector was chirping approximately	V 736		

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V 736	<p>Continued From page 6</p> <p>every 60 seconds (low battery).</p> <p>-Client #4's bedroom had a musky smell.</p> <p>-Client #1 and client #2's bedroom a chair in the room that appeared to have cigarette burns on the cushion of the seat. The dresser in the room had 4 broken drawers. The wall paper that had been painted over was bubbling behind the door area.</p> <p>-Client #3's bedroom the ceiling was peeling in the center of the room approximately the size of a small basketball.</p> <p>-Client #6 and client #7's bedroom smelled like cigarette smoke.</p> <p>-The ceiling in the back hall had a large patched rectangular area that had cracks around the seem and the ceiling was bubbling approximately the size of a basketball.</p> <p>During interview on 03/13/24 the Licensee/Qualified Professional revealed:</p> <p>-He had being doing work on all of his homes and would make the repairs as needed.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		