

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411211	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/02/2025
NAME OF PROVIDER OR SUPPLIER MCCRARY HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 721 PARAMOUNT STREET HIGH POINT, NC 27260		
(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 5/2/25. Deficiencies were cited.</p> <p>This facility is licensed for the following service category 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 4 beds and has a current census of 1. The survey sample consisted of audits of 1 current client.</p>	V 000		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Health Care Personnel Registry (HCPR) was accessed prior to employment affecting two of three staff audited. The findings are:</p> <p>Review on 5/1/25 of the personnel record for the Staff #1 revealed: -Date of hire was 10/31/24. -The HCPR was accessed on 12/5/24 after hire.</p>	V 131		

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

TITLE

(X6) DATE

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V 131	Continued From page 1 Review on 5/1/25 of the personnel record for the Qualified Professional (QP) revealed: -Date of hire was 8/6/23. -The HCPR was accessed on 8/9/23 after hire. Interview on 5/1/25 with the QP revealed: -The responsibility of processing the initial HCPR check for prospective employees is completed on the Director. Interview on 5/2/25 with the Director/Licensee revealed: -The office was in the process of moving documentation and they (HCPR check) got lost, "I take full responsibility." -He confirmed the facility failed to ensure the HCPR was accessed for the QP prior to employment.	V 131			
V 513	27E .0101 Client Rights - Least Restrictive Alternative 10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE (a) Each facility shall provide services/supports that promote a safe and respectful environment. These include: (1) using the least restrictive and most appropriate settings and methods; (2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others; (3) providing choices of activities meaningful to the clients served/supported; and (4) sharing of control over decisions with the client/legally responsible person and staff. (b) The use of a restrictive intervention procedure designed to reduce a behavior shall	V 513			

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V 513	<p>Continued From page 2</p> <p>always be accompanied by actions designed to insure dignity and respect during and after the intervention. These include:</p> <p>(1) using the intervention as a last resort; and</p> <p>(2) employing the intervention by people trained in its use.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure the least restrictive and most appropriate settings and methods were used. The findings are:</p> <p>Observation on 5/1/25 at 10:46am revealed: -A bicycle lock chain hung on the refrigerator door. -A sign that stated "No Consumers allowed in Fridge."</p> <p>Interview on 5/2/25 with Client #1 revealed: -He was able to food have when he wanted it.</p> <p>Interview on 5/1/25 with Staff #1 revealed: -Locked the refrigerator every time after he used it. -The director told him that client #1 likes to steal food and take it to his room.</p> <p>Interview on 5/2/25 with the Qualified Professional revealed: -The facility locked the refrigerator since they opened. -The facility met with the Clients Rights committee to discuss this matter, but no documentation was presented.</p>	V 513		

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V 513	Continued From page 3 Interview on 5/2/25 with the Director/Licensee revealed: -Client #1 has been diagnosed with PICA, and he sneaks and eats raw food.	V 513		
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: Based on observation and interviews the facility failed to be maintained in a clean, attractive manner, and free from offensive odors. The findings are: Observation on 5/1/25 between the times of 8:41am to 9:46am of the facility revealed: -Urine odor was in Client #1's bedroom. -Client #1's bedroom door was cracked and broken above the handle that had a circular hole the size of an adult fist. -Client #1's bedroom on rear facing wall, an electrical outlet had no covering on the socket. -Client #1's bedroom carpet on the left side in the corner of room 4 inches of carpet was not secure to the sub-floor. -Client #1's bathroom shower curtain had greenish -brownish stains in length of 5 inches around. -Client #1's bathroom tub had brown stains that were approximately 12 inches in size that coated the right side of the bottom of the tub. -Client #1's bathroom had brown stains on toilet	V 736		

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V 736	<p>Continued From page 4</p> <p>bowl brush and caddy, brown stains with wet residue 3 inches in length on the floor under the caddy also.</p> <p>-The kitchen flooring was missing one vinyl tile, exposing the sub flooring.</p> <p>Interview on 5/1/25 with Staff #1 revealed:</p> <ul style="list-style-type: none"> - Client #1 may have punched the back of the door to cause the hole, and he did not notice it. -The electrical socket covering he was not aware of it missing in client #1 room. <p>Interview on 5/2/25 with the Director/Licensee revealed:</p> <ul style="list-style-type: none"> -The tub is scrubbed but the stains did not come out. -Unaware of the damage in Client #1 bedroom door. -Unaware of the missing electrical socket outlet covering in Client #1 bedroom. -The facility is getting new flooring in the kitchen the tiles are being ordered, for the missing spaces. -Client #1 is "destructive and the carpet in his room was cleaned last week", unaware of the urine smell. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		