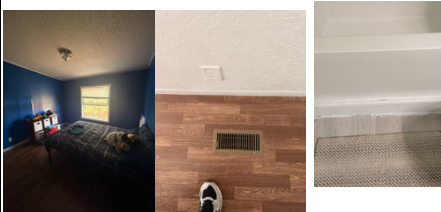


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-372	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/30/2025	
NAME OF PROVIDER OR SUPPLIER NEW YORK HOMES RESIDENTIAL CARE CENTER #2		STREET ADDRESS, CITY, STATE, ZIP CODE 82 INGLE ROAD ASHEVILLE, NC 28804		
(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>A follow up and complaint survey was completed on 4/30/25. The complaint was unsubstantiated (Intake #NC00229118). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living.</p> <p>This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p>Statement of Corrective Actions Completed</p> <p>All previously identified maintenance issues within the household have been fully addressed and resolved. The following corrective actions have been completed:</p> <ul style="list-style-type: none"> • All damaged floors have been replaced throughout the residence. • All electrical outlets have been properly covered to ensure safety. • All window blinds with missing or broken slats have been replaced. • All holes in the walls, doors, and closet areas have been patched and repaired. • The room and closet areas have been fully repainted, including walls that were previously unpainted or covered with plywood. • The bathroom floor, including the hole next to the bathtub, has been repaired and restored to a safe and clean condition. <p>These actions were taken to bring the facility into full compliance with safety and maintenance standards as required under code</p>	5-15-25
				

V 736

V 736

27G .0303(c) Facility and Grounds Maintenance

10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS

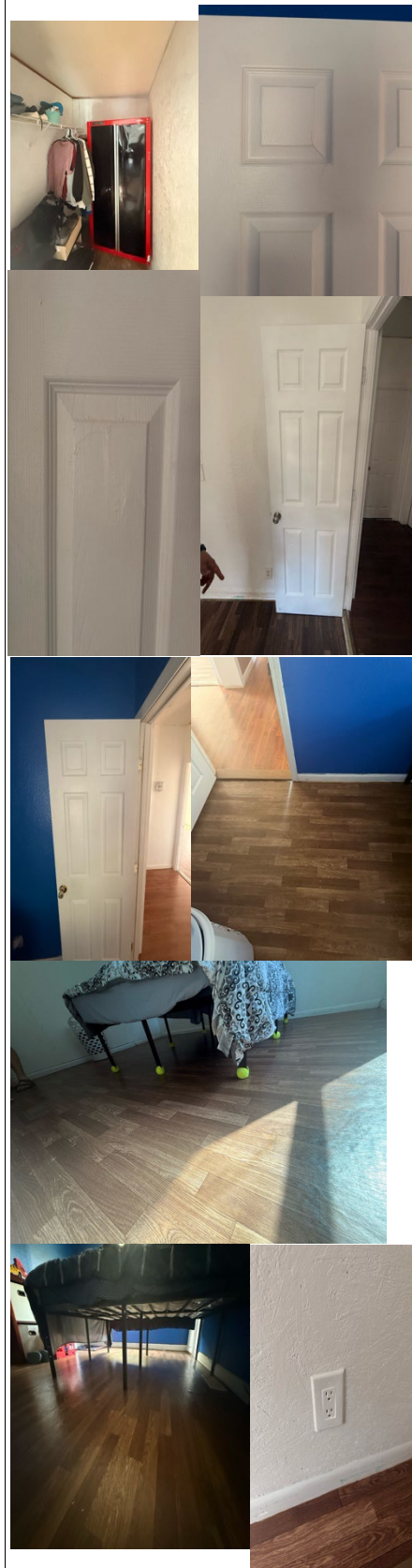
(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.

This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a safe and orderly manner. The findings are:

Observation on 4/25/25 at 12:20 p.m. of the client bedrooms and bathroom revealed:

-Bedroom #1 (Client #2): a hole in the bedroom door approximately the size of a quarter; linoleum type flooring alongside one of the bedroom walls was loose, curled up away from the floor and baseboard.

-Bedroom #2 (Client #1): 1 of 3 electrical outlets on the wall was missing a cover; air vent cover was missing from the vent which was located on the floor between the foot of the bed and a few inches away from the wall; 3 of the 4 bedroom walls were covered with plywood and were



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

TITLE

(X6) DATE

STATE FORM

6899

RS1A11

If continuation sheet 1 of 3

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-372	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____		(X3) DATE SURVEY COMPLETED 04/30/2025
NAME OF PROVIDER OR SUPPLIER NEW YORK HOMES RESIDENTIAL CARE CENTER #2		STREET ADDRESS, CITY, STATE, ZIP CODE 82 INGLE ROAD ASHEVILLE, NC 28804		
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<p>V 736</p> <p>Continued From page 1</p> <p>unpainted; Additionally, a wall in the bedroom closet was also covered with plywood and unpainted. Linoleum type flooring was ripped and missing in multiple places throughout the room, which included approximately 4 foot (ft) by 6 ft area underneath the bed that was ripped along the edges, a 1 ft by 1 ft missing segment near the wall with the window also ripped, a 6 inch by 6 inch missing segment by the door also ripped, and several long rips ranging in size from 1 ft to 6 ft throughout the flooring; areas of the flooring were loose and rippled near the bedroom door. - Bedroom #3 (Client #3): unpainted white patch on the wall above the bed approximately the size of a basketball; 2 slats of the window blind were broken and missing a segment; at the foot of the bed was ripped linoleum on the floor approximately 1 ft by 3 inch area, above this area by the outlet was a dented/cracked area in the sheetrock about 3 inches long; next to the side of the bed was ripped linoleum with a bubbled area next to the rip approximately 1 ft in length; the bedroom door was cracked through on the top left, about the size of an ink pen; on the floor of the entryway was a rectangular area appeared to be cut out, about the size of a brick, could see wood and a foil colored material through the hole. -Bathroom: a hole in the door approximately the size of a baseball; on the floor next to the bathtub was a piece of flooring missing that was the shape of crescent moon approximately 6 inches long. -The smoke detector in the hall area of the client bedrooms was continuously beeping.</p> <p>Interview on 4/30/25 with the AFL Provider revealed: -It was difficult to get ahold of a contractor; there was not a contractor scheduled to come to the facility "yet."</p>	<p>V 736</p>
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STATE FORM

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RS1A11

If continuation sheet 2 of 3

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-372	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/30/2025
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V 736	<p>Continued From page 2</p> <p>-Client #1 "destroys property on a daily basis...it's hard to get someone (contractor) on a daily basis."</p> <p>-"All of our guys (clients) throw behaviors...we try to have people come in and fix it" as soon as possible.</p> <p>Interviews on 4/25/25 and 4/30/25 with the Vice President of New York Homes revealed: -Did not know where the vent cover was for Client #1's room, but would ensure it was replaced.</p> <p>Interview on 4/30/25 with the Qualified Professional revealed: -The last conversation with the owner of the facility, approximately 1 month ago, was that there was a contractor on the schedule to make the repairs.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736	