

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411235	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/08/2025
NAME OF PROVIDER OR SUPPLIER BLAZINGWOOD		STREET ADDRESS, CITY, STATE, ZIP CODE 824 BLAZINGWOOD DRIVE GREENSBORO, NC 27406		
(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	INITIAL COMMENTS An annual, complaint and follow up survey was completed on May 8, 2025. The complaint was substantiated (intake #NC00229962). A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 3 and has a current census of 3. The survey sample consisted of audits of 3 current clients.	V 000	To address concerns with the grounds of the identified facility, NHPS has implemented/ completed the following: - All patched areas have been or will be painted. All holes will be patched and painted.	6/15/25
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 observations and interviews, the facility was not maintained in an attractive manner. The findings are: Observations on 5/7/25 at 2:50pm of the facility revealed: -A 4 inch by 4 inch patched area in the staff's office door. -A closet door was off track in the kitchen area with access to the laundry area. - <i>Removed</i> -There was an 18 inch by 2 inch area of carpeting that was worn that went from the living room into the kitchen area. - <i>Flooring will be replaced</i> -At the top of the landing going to the second floor was a 3 inch by 3 inch hole in the wall. <i>Hole patched</i> -In bathroom #1, there were 3 burned out	V 736	- NHPS has worked over the years to prevent the occurrence of holes in the walls. These occurrences have decreased significantly. This is in part due to the NHPS staff working with NICO and Behavior Support Specialist to address the behavioral challenges of one of the members in the home. This will be	

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

TITLE

(X6) DATE

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V 736	<p>Continued From page 1</p> <p>lightbulbs above the vanity.</p> <p>-Bathroom #2 doubles sink had duct tape stretched across one of the sink's basin and knobs. — <i>Removed</i></p> <p>-In bathroom #2, there were two patched holes approximately 2 inches by 2 inches. <i>Painted on 6/3</i></p> <p>Interview on 5/7/25 with client #2 revealed:</p> <p>-Only one side of the vanity sinks worked.</p> <p>-"The tape is there so no one can touch it."</p> <p>-Some of the holes put in the wall were "when I got mad."</p> <p>-"I bang on the walls to get people's attention."</p> <p>Interview on 5/7/25 with staff #1 revealed:</p> <p>-The bathroom sink had not been working for the past 3 weeks.</p> <p>-Holes in the facility's walls were "like that before I got here which was 5 months ago."</p> <p>-Some of the holes were caused by the clients' behaviors.</p> <p>-Maintenance had repaired some holes in the walls.</p> <p>Interview on 5/7/25 with the Group Home Manager revealed:</p> <p>-Had requested maintenance make the necessary repairs.</p> <p>-The Agency was not satisfied with the work that had been completed.</p> <p>-"We are struggling to find, severely, a new maintenance company. Our Human Resources is looking for a supervisor to oversee the maintenance department. We are concerned about the repairs that have not been made."</p> <p>Interview on 5/8/25 with the Qualified Professional revealed:</p> <p>-"I have noticed some things that need to be done at the facility. I do know who the maintenance</p>	V 736	<p>Ongoing to ensure the individual is safe and has stable housing. To ensure maximum coordination of care and to address the concern fully, the NHPS team will ensure that the individuals team, including the guardian of the member, are informed and strategies and interventions are discussed and implemented. It is important to note that discussion have been had concerning moving the individual into another setting.</p> <p>- Doors to the laundry closet have been removed. <i>5/8/25</i></p> <p>- Carpet will be repaired until the flooring of the down stairs is replaced with hardwood vinyl. <i>6/15/25 (for carpet to be repaired)</i></p> <p>- New flooring to be installed 7/15/25</p>	Ongoing

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V 736	Continued From page 2 person is, but they are contracted." Interview on 5/8/25 with the Director revealed: -"I know we had some stuff done. The carpet was not addressed. We are still working on that and getting new carpet. The holes in the wall is something we are currently addressing. We have an individual that has behaviors and it (punching holes in the walls) has been an ongoing issue ..." -"Was aware of the duct tape in one of the clients' bathrooms. -"Nothing is wrong with the sink. We had a previous client that would put things down the sink pipe area. It does work. We have a client that moved into that room and staff did not take off the tape when he moved in. I don't know why." -"Maintenance has been out to the facility. -"There's a list of things to be done." This deficiency has been cited 3 times since the original cite on December 7, 2022 and must be corrected within 30 days.	V 736	- Bathroom #1 light bulbs have been replaced - Tape was removed from the sink's basin in bathroom #2 and the sink is operable - NHPS will continue to conduct monthly monitoring of the home to ensure the grounds are kept. A potential maintenance provider was identified on 6/2/25. - NHPS owners will complete the monthly monitoring. NHPS Group Home Management will continue to complete weekly ongoing monitoring and will report any deficiencies to the NHPS Owners. All repairs should be completed within 72 hrs of being reported. If repairs	5/8/25 5/8/25

Identified need more than 72 hrs to be repaired, a definite time frame has to be provided by the repairer and temporary accommodations should be made to ensure safety. and