

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-059</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>06/05/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>JAMES FARM HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>148 JAMES FARM ROAD</b> <b>STATESVILLE, NC 28625</b>		
(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><b>INITIAL COMMENTS</b></p> <p>An annual, complaint and follow up survey was completed on 6/5/25. The complaint was unsubstantiated (intake NC00229016). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>The facility is licensed for 4 and has a current census of 4. The survey sample consisted of audits of 1 discharged client and 2 current clients.</p>	V 000		
V 736	<p><b>27G .0303(c) Facility and Grounds Maintenance</b></p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to be maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation of the facility on 6/5/25 from 2:23 pm until 3:30 pm revealed:</p> <p>Client #2's bathroom:</p> <ul style="list-style-type: none"> <li>- A 4' by 4' (approximate in size) portion of wall between the sink and the doorway which had been plastered but remained unpainted</li> <li>- A 5' by 4' (approximate in size) portion of wall (rectangular in shape) which had been plastered but remained unpainted</li> <li>- The wall beside and behind client #2's toilet had areas where the paint was chipped and</li> </ul>	V 736		

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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>peeling from the wall</p> <ul style="list-style-type: none"> <li>- The top of the baseboards underneath the areas of the peeling wall paint were light brown in color with the remainder of the baseboard being white in color</li> </ul> <p>Client #2's bedroom:</p> <ul style="list-style-type: none"> <li>- A cracked area above the top of the left middle panel of the bedroom door</li> <li>- A cracked area near the top of the right middle panel of the bedroom door</li> <li>- A circular area around the bedroom doorknob had been painted white which was in contrast to the overall color of the door (beige)</li> </ul> <p>Basement den area:</p> <ul style="list-style-type: none"> <li>- Two stained ceiling tiles</li> <li>- A missing ceiling tile (a white U shaped plumbing pipe could be observed from where the ceiling tile would have been placed)</li> </ul> <p>Basement bathroom:</p> <ul style="list-style-type: none"> <li>- A stained ceiling tile</li> <li>- Three pieces of a torn white vinyl-like material hanging from the ceiling</li> </ul> <p>Interview on 6/5/25 with the Residential Team Lead revealed:</p> <ul style="list-style-type: none"> <li>- Work orders had been submitted regarding the needed repairs</li> <li>- Some of the work had not been completed (basement ceiling tiles) due to ongoing repairs being made to the upstairs bathroom</li> </ul> <p>Interview on 6/5/25 with the IDD (Intellectual Developmental Disabilities) Regional Administrator revealed:</p> <ul style="list-style-type: none"> <li>- She would ensure the areas within the facility which needed repair were addressed as soon as possible</li> </ul>	V 736		

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V 736	Continued From page 2  This deficiency has been cited two times since the original cite date of 7/31/23 and must be corrected within 30 days.	V 736		