Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: COMPLETED R B. WING MHL092-902 08/07/2025 ASR-MH Licensure Sect NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3319 TRAWICK ROAD **RUSMED 1** RALEIGH, NC 27604 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRFFIX **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual and follow up survey was completed on August 7, 2025. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 3 and has a current census of 2. The survey sample consisted of Dedicated Maintenance Support: Rusmed audits of 2 current clients. will maintain a contracted maintenance man to provide additional support to the landlord and ensure all facility concerns are addressed V 736 27G .0303(c) Facility and Grounds Maintenance V 736 promptly. Immediate Reporting Protocol: Staff are 10A NCAC 27G .0303 LOCATION AND instructed to report any holes, damage, or EXTERIOR REQUIREMENTS unsafe conditions immediately to the House (c) Each facility and its grounds shall be Manager, maintained in a safe, clean, attractive and orderly Authority to Act: The House Manager, manner and shall be kept free from offensive has full authority to contact the maintenance man directly and arrange odor. repairs without delay. Shift-End Checklist: All staff will complete a This Rule is not met as evidenced by: brief facility checklist at the end of their shifts Based on observation and interview, the facility to identify any property damage, cleanliness was not maintained in a safe, clean, attractive, issues, or odors. orderly manner. The findings are: Manager Oversight: The House Manager will monitor all checklists daily to ensure issues Observation on 8/6/25 at approximately 9:05 am are documented, reported, and resolved. revealed: Timely Repairs: -In the kitchen the wall beside the table has a · All minor facility damages (holes, broken fixtures, etc.) will be repaired within 48 hours hole the size of a basketball of discovery. -Client #1's bedroom has a hole in the wall beside · Any larger repairs will be escalated to the the bed the size of a baseball. landlord and maintenance provider the same -Client #2's bathroom sink has a three-inch crack day, with documented follow-up until on the right side. completion. Ongoing Compliance: These procedures are Interview on 8/6/25 with the House Manager now part of ResMed's facility maintenance revealed: protocol to ensure compliance with 27G .0303(c). -"The faster we fix the repairs the faster clients tear it up." Responsible Person: Shonda Parrish, House Manager -"The guy came out to do the repairs, but he was Division of Health Service Regulation

Clinical Sypervisor 8/20/25

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

STATE FORM

Division of Health Service Regulation

AND PLAN OF CORRECTION IDENTIFICATION NUMBER:  MHL092-902		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION  A. BUILDING:		(X3) DATE SURVEY COMPLETED	
		B. WING			08/07/2025		
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RUSMED 1 3319 TRAWICK ROAD RALEIGH, NC 27604							
(X4) ID SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S BLANCE CORRECTION							
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V 736	Continued From page 1		V 736				
	behind due to having a big contact to complete." -"This is an old house and the house is fragile."						
	Interview on 8/7/25 with the Qualified						
Professional (QP) revealed: -"Sometimes we have to wait for the landlord to							
fix the repairs, and we are at his mercy."							
	-"What repairs we can fix we do, and the other repairs has to be fixed by the landlord."						
This deficiency has been cited 4 times since the							
original cite on 9/20/21 and must be corrected within 30 days.							