

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-946	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/05/2025
NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME - MARCONY WAY		STREET ADDRESS, CITY, STATE, ZIP CODE 3316 MARCONY WAY RALEIGH, NC 27610		
(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 and follow up survey was completed on August 5, 2025. Deficiencies were 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 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes. (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use.	V 114		

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

TITLE

(X6) DATE

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V 114	Continued From page 1 This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure fire and disaster drills were conducted quarterly and on each shift. The findings are: Review on 8/4/25 of facility's fire drill log from July 2024 through July 2025 revealed: -3rd quarter (July, August, and September) 2024: No fire drill conducted on 3rd shift (11:00pm-7:00am). -4th quarter (October, November, and December) 2024: No fire drill conducted on 3rd shift (11:00pm-7:00am). -1st quarter (January, February, and March) 2025: No fire drills conducted on 2nd shift (3:00pm-11:00pm) and 3rd shift (11:00pm-7:00am). -2nd quarter (April, May, and June) 2025: No fire drills conducted. Review on 8/4/25 of facility's disaster drills log from July 2024 through July 2025 revealed: -3rd quarter (July, August, and September) 2024: No disaster drill conducted on 3rd shift (11:00pm-7:00am). -4th quarter (October, November, and December) 2024: No disaster drill conducted on 3rd shift (11:00pm-7:00am). -1st quarter (January, February, and March) 2025: No disaster drills conducted on 1st shift (7:00am-3:00pm) and 3rd shift (11:00pm-7:00am). -2nd quarter (April, May, and June) 2025: No disaster drill conducted on 3rd shift (11:00pm-7:00am). Interview on 8/4/25 with Staff #1 revealed: -"I haven't been trained on how to do any drills."	V 114		

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V 114	Continued From page 2 Interview on 8/4/25 with Qualified Professional (QP) revealed: -"I noticed that some drills were missing." -"I didn't train the new staff on how to do the drills."	V 114		
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, clean, attractive, orderly manner. The findings are: Observation on 8/4/25 at approximately 8:45 am revealed: -Client #2's bedroom window blind had missing slats. -Client #6's bedroom window blind had missing slats. -The bathroom commode upstairs had a crack in the molding on the top base of the commode. -Client #4 and #5's bedroom had missing floor tiles near both their beds. -The stairway had rips in the carpet runner up and downstairs. -In a seating area downstairs, there were multiple water stains on the ceiling. -A white spot the size of a basketball in the floor tile in the sitting area downstairs. Interview on 8/4/25 with Staff #1 revealed: -"I'm not sure about the facility getting repairs	V 736		

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V 736	Continued From page 3 completed since I have been hired." Interview on 8/4/25 with Qualified Professional (QP) revealed: -"Maintenance has done some repairs around the facility, but I can't say what he didn't finish." -"All I can do is recommend for the repairs to get done." This deficiency has been cited several times over the last few surveys and must be corrected within 30 days.	V 736			