

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL098-213	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 10/16/2025
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NAME OF PROVIDER OR SUPPLIER GRACE 4 THE YOUTH LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 3001 NASH STREET NW WILSON, NC 27896
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on October 16, 2025. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>This facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have a first aid kit accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure disaster drills were conducted quarterly and on each shift. The</p>	V 114		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 114	<p>Continued From page 1</p> <p>findings are:</p> <p>Review on 10/16/25 of facility records from October 2024 through September 2025 revealed:</p> <ul style="list-style-type: none"> - No disaster drills documented for the 1st quarter of 2025. - No disaster drills documented for 3rd shift, weekend 8am to 8pm and weekend 8pm to 8am during the 3rd quarter of 2025. <p>Interview on 10/14/25 client #1 stated:</p> <ul style="list-style-type: none"> - He was admitted in February 2025. - He had participated in disaster drills in the facility. <p>Interview on 10/14/25 client #3 stated he had participated in disaster drills at the facility.</p> <p>Interview on 10/14/25 and 10/16/25 the Program Director stated:</p> <ul style="list-style-type: none"> - The shifts at the facility were 1st shift-7am to 3pm, 2nd shift 3pm to 11pm, 3rd shift 11pm and 7am and weekend shifts from 8am to 8pm and 8pm to 8am. - He would make sure staff documented correctly the disaster drills were done. 	V 114		
V 296	<p>27G .1704 Residential Tx. Child/Adol - Min. Staffing</p> <p>10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS</p> <p>(a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times.</p> <p>(b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows:</p>	V 296		

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V 296	<p>Continued From page 2</p> <p>(1) two direct care staff shall be present for one, two, three or four children or adolescents;</p> <p>(2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and</p> <p>(3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents.</p> <p>(c) The minimum number of direct care staff during child or adolescent sleep hours is as follows:</p> <p>(1) two direct care staff shall be present and one shall be awake for one through four children or adolescents;</p> <p>(2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan.</p>	V 296		

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V 296	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interviews the facility failed to ensure 2 direct care staff were present for 1 of 3 current audited clients (#1) The findings are:</p> <p>Review on 10/16/25 of client #1's record revealed:</p> <ul style="list-style-type: none"> - 17 year old male. - Admission date of 01/28/25. - Diagnoses of Attention Deficit Hyperactivity Disorder, Borderline Intellectual Functioning, Autism Spectrum Disorder, Learning Disorders and Persistent Mood Disorder. <p>Observation 10/14/25 at approximately 1pm revealed:</p> <ul style="list-style-type: none"> - Client #1 was at the facility with the Program Director. - The Program Director was the only staff at the facility. - Staff #4 arrived approximately 15 minutes later. <p>Interview on 10/14/25 client #1 stated:</p> <ul style="list-style-type: none"> - There was usually 1 staff at the facility with clients. <p>Interview on 10/14/25 the Program Director stated:</p> <ul style="list-style-type: none"> - He was the only staff at the facility with client #1. - Another staff had gone to get some food. - He was aware 2 staff should supervise 1 thru 4 clients at the facility. - He would ensure 2 staff supervised the clients in the community and the facility. 	V 296		

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V 736 V 736	<p>Continued From page 4</p> <p>27G .0303(c) Facility and Grounds Maintenance</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 was not maintained in a clean, attractive and orderly manner. The findings are:</p> <p>Observation on 10/14/25 at approximately 3pm revealed:</p> <ul style="list-style-type: none"> - Client #1 and #2's bedroom had 3 broken slats on the window blinds. The bedroom door had dark marks on the surface. - The hallway bathroom used by the clients had dark grout on the shower tiles. A handle was missing from a drawer. A thick layer of dust was on the exhaust fan. The ceiling had a black substance on the surface. - The love seat in the living room had a torn cover. - The linoleum on the transition between the dining room and the living room had an approximately 12 inch rip. - The kitchen ceiling had an approximately soccer ball sized area which had separated from the surface. <p>Interview on 10/16/25 the Program Manager stated:</p> <ul style="list-style-type: none"> - He would follow up on the identified facility issues. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736 V 736		

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