

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL017-027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/13/2025
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NAME OF PROVIDER OR SUPPLIER FAITHFUL COMPANION GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 3848 CHERRY GROVE ROAD ELON, NC 27244
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(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>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on 11/13/25. The complaint was substantiated (intake #NC234116). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 6 and has a current census of 3. The survey sample consisted of audits 3 current clients and 1 former client.</p>	V 000		
V 541	<p>27F .0104 Client Rights - Stor. & Protect of Cloth/Poss</p> <p>10A NCAC 27F .0104 STORAGE AND PROTECTION OF CLOTHING AND POSSESSIONS</p> <p>Facility employees shall make every effort to protect each client's personal clothing and possessions from theft, damage, destruction, loss, and misplacement. This includes, but is not limited to, assisting the client in developing and maintaining an inventory of clothing and personal possessions if the client or legally responsible person desires.</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to make every effort to protect each client's personal clothing from loss, affecting 1 of 2 former clients (FC #4) audited. The findings are:</p> <p>Review on 11/10/25 of FC #4's record revealed: - Admitted: 1/19/22</p>	V 541		

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

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V 541	<p>Continued From page 1</p> <ul style="list-style-type: none"> - Discharge date: 10/25/25 - Diagnoses: Schizoaffective Disorder and Neurocognitive Disorder - No documentation regarding inventory of personal belongings at the time of admission and again at discharge. <p>Attempted interview on 4/13/25 with staff #2: - She was hospitalized and unable to talk.</p> <p>Interview on 11/13/25 with staff #1 revealed: - She was present when FC #4 was discharged and did not know that FC #4 was missing any personal items when she was discharged.</p> <p>Interview on 11/13/25 with the Assistant Director revealed: - When FC #4 was admitted she did not have a lot of clothes. She did not "think" any of FC #4's personal items were missing at the time of her discharge. - The facility failed to complete a written inventory of FC #4's personal belongings at the time of admission and again at discharge.</p> <p>Interview on 11/12/25 with the Administrator revealed: - The facility failed to complete a written inventory of FC #4's personal belongings at the time of admission and again at discharge. - Denied that FC #4 was missing any personal items when she was discharged. - "She had a ton of clothes."</p> <p>Interview on 11/13/25 with FC #4 revealed: - At the time of her discharge from the facility, she did not have some of her clothes and "hair pieces." - At her discharge she did not have "a couple of pants...(and) about 4 shirts were missing."</p>	V 541		

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