

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL079-143	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 03/09/2026
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NAME OF PROVIDER OR SUPPLIER LAVERNE'S HAVEN-CENTER COURT	STREET ADDRESS, CITY, STATE, ZIP CODE 147 CENTER COURT EDEN, NC 27288
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 3/9/26. 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 Disability.</p> <p>This facility is licensed for 5 and has a current census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(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 record reviews, observations and interviews, the facility was not maintained in a safe, clean, and attractive manner. The findings are:</p> <p>Observation on 3/6/26 between 9:15am and 9:25am of client #1's bedroom revealed: -Approximately 12 standard size flooring tile measuring 12x12 inches (in) missing from floor. -Broken/bent window curtain rod hanging sideways from the frame. -Approximately 12 inches in diameter of a patched but unpainted plaster repair on a brown wall.</p> <p>Observation on 3/6/26 at approximately 9:27am of the facility's bedroom hallway revealed: -20in x 25 in wall filter grill covered in brown dust</p>	V 736		

Division of Health Service Regulation 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>particles.</p> <p>Observation on 3/6/26 between 9:40am to 9:45am of client #4's bedroom revealed:</p> <ul style="list-style-type: none"> - The bedroom contained two windows. - The windows could not be opened due to screws located on the left side of each of the windows. -The left wall of the room had a large patched but unpainted rectangle shaped plaster repair on the middle of the wall. <p>Review on 3/9/26 of the North Carolina Residential Building Code Section 310.2.1 revealed:</p> <ul style="list-style-type: none"> - "Emergency Egress-Every sleeping room shall have at least one operable window or emergency door approved for emergency egress. The units must be operable without the use of key or tool to a full clear opening. If a window is provided, the sill height may not be more than 44" above the floor. These must provide a clear opening of 4 square feet. The minimum height shall be 22 inches and minimum width is 20 inches (1996 Building Code). (For buildings built under the previous Residential Building Code the requirements allowed for a sill height of 48" and an opening of 432 square inches in an area with a minim dimension of 16." <p>Interview on 3/6/26 and 3/9/26 with client #4 revealed:</p> <ul style="list-style-type: none"> - "I don't know how long the nails (screws) have been there, maybe a month." - Did not know which staff put the screws in the windows. -"[Client #1] floors (tiles) are missing due to him peeing on the floor and consistently using the mop to clean up the pee." 	V 736		

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V 736	<p>Continued From page 2</p> <p>Interview on 3/6/26 with staff #1 revealed: -He did not know who put the screws in both bedroom windows. -"That is a safety hazard." -The Licensee did not know about the screws in the windows.</p> <p>Observation on 3/6/26 of staff #1 revealed: -Had removed one screw from each of the two windows in client #4's bedroom at 9:54am.</p> <p>Interview on 3/9/26 with the Qualified Professional revealed: - "I am not aware of his (client #4) window being nailed (screwed) shut." - She did not know how long they (windows) were screwed shut.</p> <p>Interview on 3/6/26 with the Licensee revealed: - Was not aware that a screw had been put nailed in client #4 windows. - Client #4 had a history of elopement, but screwing the window shut was not an intervention. - Did not know which staff screwed the windows closed.</p> <p>Review on 3/6/26 of the Plan of Protection dated 3/6/26 written by the Licensee revealed: "What immediate action will the facility take to ensure the safety of the consumers in your care? I was informed by staff member [staff #1] that one of the residents' rooms had screws in his window. I was unaware of this. I asked [staff #1] if he knew anything about it, he said no. I questioned other staff members, and they all stated they did not know. I questioned the residents, asking if they knew of anyone placing screws in their windows but none of them knew anything. The screws were immediately removed from the</p>	V 736		

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V 736	<p>Continued From page 3</p> <p>resident's window." -Describe your plans to make sure the above happens."I, the Facility Director (Licensee) will complete monthly inspections of the facility, which will include checking safety hazards. The facility Director will follow up with all staff members, as necessary to ensure they complete weekly inspections of the facility for safety hazards and report them to the Facility Director."</p> <p>This facility served a client with diagnoses of: Moderate Intellectual Developmental Disability and Schizoaffective Disorder, Bipolar Type. Client #4 was admitted in January 2022 and had a history of elopement. Client #4's bedroom windows had been screwed shut. This prevented egress from the client's bedroom window in case of a fire or disaster emergency.</p> <p>This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days.</p>	V 736		