

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 05/11/2026
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 5/11/26. Deficiencies were 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 6. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 113	<p>27G .0206 Client Records</p> <p>10A NCAC 27G .0206 CLIENT RECORDS</p> <p>(a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to:</p> <p>(1) an identification face sheet which includes:</p> <p>(A) name (last, first, middle, maiden);</p> <p>(B) client record number;</p> <p>(C) date of birth;</p> <p>(D) race, gender and marital status;</p> <p>(E) admission date;</p> <p>(F) discharge date;</p> <p>(2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV;</p> <p>(3) documentation of the screening and assessment;</p> <p>(4) treatment/habilitation or service plan;</p> <p>(5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician;</p> <p>(6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician;</p>	V 113		

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

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V 113	<p>Continued From page 1</p> <p>(7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to maintain complete records for 3 of 3 audited clients (#1, #4, and #6). The findings are:</p> <p>Review on 4/17/26 of client #1's record revealed: - Admitted: 4/8/25 - Diagnoses: Schizophrenia, Paranoid Type; Hyperlipidemia; Hypertension; Diabetes - No documentation of services provided for medical or psychiatric care</p> <p>Review on 4/17/26 of client #4's record revealed: - Admitted: 11/15/19 - Diagnoses: Bipolar I Disorder with Psychotic Features; Plaque Psoriasis - No documentation of services provided for medical or psychiatric care</p>	V 113		

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V 113	<p>Continued From page 2</p> <p>Review on 4/17/26 of client #6's record revealed:</p> <ul style="list-style-type: none"> - Admitted: 3/12/26 - Diagnoses: Schizoaffective Disorder, Bipolar Type; Cannabis Use Disorder - No documentation of services provided for medical or psychiatric care - Client was his own guardian - No signed statement from the client granting permission to seek emergency care from a hospital or physician <p>Interview on 4/17/26 client #1 reported:</p> <ul style="list-style-type: none"> - Saw his physician for "just a check-up" and "it's been about 4 or 5 months since I've seen them"and he usually went with staff or by himself and did not receive paperwork for the visit <p>Interview on 4/17/26 client #4 reported:</p> <ul style="list-style-type: none"> - His psychiatrist "he's been coming out here but I can go there" and when he went to the office he took local transit and did not obtain paperwork to bring to the group home - Did not remember when his last psychiatric or medical physician appointment was <p>Interview on 4/21/26 client #6 reported:</p> <ul style="list-style-type: none"> - Saw his psychiatrist the week prior but did not remember which day and "I think they got me set to see my medical doctor - I think it's the 17th of May (2026)" and "I go on my own" - Staff did not ask for paperwork for doctor visits so he did not bring anything back to the facility except "medication lists" <p>Interview on 4/21/26 staff #1 reported:</p> <ul style="list-style-type: none"> - The Licensee was responsible for ensuring client records were completed - Did not take clients to their appointments and when clients came back from their medical and psychiatric appointments "they (clients) give to 	V 113		

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V 113	<p>Continued From page 3</p> <p>me their discharge report and I give it to [Licensee] and [Licensee] know where to put it"</p> <ul style="list-style-type: none"> - "They (psychiatrists) come here" to see the clients and clients #1 and #6 "go on their own" to their appointments if it is not at the facility <p>Former Staff #2 was unavailable for interview because he was out of the country.</p> <p>Interview on 4/21/26 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - "It would be the staff member or the administrator (Licensee)" that was responsible for ensuring client records were completed - The staff that attended an appointment with a client was responsible for obtaining lab tests or after-visit summaries and if a client attended an appointment on their own, "they (client) would get the documentation and if we know about it, we can follow-up" to get documentation after the appointment - Was not aware that client #6's permission to seek emergency care was not in his record <p>Interview on 3/31/26 the Licensee reported:</p> <ul style="list-style-type: none"> - She or the QP were responsible for ensuring client records were completed - Documentation of lab tests or services provided for medical care "sometimes I file them in the chart but sometimes I keep them with me" and "sometimes the doctors they don't send something and staff doesn't always ask" - Was not aware that client #6's permission to seek emergency care was not in his record - Former staff #2 "went back to Africa" and the only phone number she had was "for him in Africa" 	V 113		

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V 114	Continued From page 4	V 114		
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 interview, the facility failed to ensure fire and disaster drills were completed at least quarterly and repeated for each shift. The findings are:</p> <p>Attempted review on 4/17/26 of the facility's fire and disaster drills revealed:</p> <ul style="list-style-type: none"> - Fire and disaster drill logs were not provided by the time of exit <p>Interview on 4/17/26 client #1 reported:</p> <ul style="list-style-type: none"> - Admitted to the facility "about a year and a half, maybe 2 years" - Fire drills had been completed at the facility "every now and then" and "we did one maybe 2 weeks ago" and clients "just stand at the exits" 	V 114		

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V 114	<p>Continued From page 5</p> <p>while staff "clears the area and everybody can go back to what they were doing"</p> <ul style="list-style-type: none"> - No other drills had been completed at the facility <p>Interview on 4/17/26 client #4 reported:</p> <ul style="list-style-type: none"> - Admitted to the facility "5½ years" - "We haven't had one (fire drill) with this staff and was "not sure" when the last fire drill had been completed at the facility - No disaster drills were completed at the facility <p>Interview on 4/21/26 client #6 reported:</p> <ul style="list-style-type: none"> - Had been at the facility "off and on for about 2 -3 months" - Fire drills had been completed at the facility "about bi-weekly" when "we'll go over the floorplan and then they'll tell us where to go in case of a fire, show us the exit and we all go outside" but did not remember where they went outside - Disaster drills were not completed at the facility <p>Interview on 4/21/26 staff #1 reported:</p> <ul style="list-style-type: none"> - Had started working at the facility in March 2026 - "I've not done that (fire or disaster drills)" at the facility <p>Former Staff #2 was unavailable for interview because he was out of the country.</p> <p>Interviews on 4/17/26 and 4/21/26 the QP reported:</p> <ul style="list-style-type: none"> - The staff was responsible for ensuring fire and disaster drills were completed at the facility and the Licensee "should be checking behind them" 	V 114		

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V 114	<p>Continued From page 6</p> <ul style="list-style-type: none"> - Was unable to locate the fire and disaster drill logs <p>Interview on 4/22/26 the Licensee reported:</p> <ul style="list-style-type: none"> - The staff was responsible for ensuring fire and disaster drills were completed at the facility - She and the QP were responsible for checking the documentation that fire and disaster drills were completed - Was not aware that fire and disaster drills had not been completed at the facility - Former staff #2 "went back to Africa" and the only phone number she had was "for him in Africa" <p>This deficiency has been cited 4 times since the original cite on 10/21/24 and must be corrected within 30 days.</p>	V 114		
V 736	<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 safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 4/17/26 at 11:09AM revealed:</p> <ul style="list-style-type: none"> - Living Room <ul style="list-style-type: none"> - Horizontal black mark on the wall by the hallway that was 4 feet in length and 3 feet from the floor - Horizontal black mark on the wall to the 	V 736		

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V 736	<p>Continued From page 7</p> <p>left of the window that was approximately 4 inches in length above the top right corner of the chair</p> <ul style="list-style-type: none"> - Hallway <ul style="list-style-type: none"> - Back door did not close properly as the latch and strike plate were misaligned about 1/8 inch - Ceiling paint was peeling 4 inches in length 18 inches from the smoke detector and 10 inches from the wall - Closet was missing the handle to the left folding door - Closet folding door on the right was not in it's track and the door would not close properly with a 2-inch gap between the doors at the bottom and 1½ inch of the top of the right door sat behind the left door at the top - Wall paint was peeling on the corner to the right of the closet 3 feet from the floor approximately 1 foot in length - Guest/staff bathroom <ul style="list-style-type: none"> - Circular hole in the wall behind the sink approximately 3 inches in diameter with tissue pressed into the hole that stuck out from the wall approximately one inch - Vanity doors were hanging and 2 inches at the top of the left door sat behind the right door at with a ½ inch gap between the doors at the bottom and a triangular gap at the top that was 1½ inches tall where the doors met - Hallway Bathroom <ul style="list-style-type: none"> - Wall to the right of the toilet was separated in the corner with a 1-inch gap at the floor - Tile directly in front of and to the left of the toilet was cracked with the cracks forming an X-shape where one point of the x started approximately 1½ inch from the top right corner and extended approximately 8 inches across the tile to approximately 3 inches from the bottom left 	V 736		

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V 736	<p>Continued From page 8</p> <p>corner and the other crack started underneath the base of the toilet and extended 10 inches across the tile to the left side approximately 2 inches from the bottom right corner of the 12-inch by 12-inch tile</p> <ul style="list-style-type: none"> - Tile to the left of the toilet had two cracks that formed a y-shape across the entire 12-inch by 10-inch tile - Tile in front of the washer was cracked in a sideways V-shape where the bottom point of the v was approximately 4 inches from the top left corner of the tile, the top right point was approximately 3 inches from the top right corner of the tile, and the top left point of the v was approximately 1 inch from the bottom left corner of the 12-inch by 12-inch tile - Tile to the left of the washer was cracked vertically where the top of the crack was 2 inches from the top right corner, and the bottom was 2½ inch from the bottom right corner of the 12-inch by 12-inch tile - Walk-in shower glass wall was mostly covered in light brown residue and left shower wall glass was not secured at the base and moved inward approximately 2 inches from its location when pressure was applied - White square patch to the left of the shower that started at the baseboard and extended 9 inches upward - Horizontal scratch on the wall 2½ feet from the floor, approximately 6 inches to the left of the shower, and approximately 3 feet in length - Sink did not drain properly and was ¾ full after the water ran for approximately 30 seconds - Backyard deck: <ul style="list-style-type: none"> - Wood bench on deck had 2 rotted boards on the seat with approximately 8 inches by 7 inches of the seat missing - A nail was protruding approximately 1 1/2 to 2 inches up from the seat frame where the 	V 736		

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V 736	<p>Continued From page 9</p> <p>wood boards were rotted away on the bench</p> <ul style="list-style-type: none"> - Wood siding of the facility near the wood bench was rotted in several places with missing pieces of siding including a hole approximately 8 inches by 3 inches - Other nails were protruding approximately 1/8 inch up from the backrest of the bench - A hole in the deck floor with an approximate 4 inch by 18 inch piece of board missing - This hole was approximately 1 foot in front of the wood bench and 2 feet from the facility's exterior wall - Several boards were rotted, cracked and had missing pieces of the board in multiple areas along the boards leaving various size gaps ranging from 1/2 inch by 1 inch to 1 inch by 6 inches - Several boards were warped, no longer secured to the deck frame and raised up from the deck frame causing an uneven surface - Exposed and rusted nails were protruding approximately 1/8 to 1/2 inch up from the rotted deck boards in multiple areas across the deck - A warped deck board approximately 10 feet in length was laying on the deck in the corner opposite the facility with nails protruding approximately 1 inch on each end of the board - Client #1 & #5's bedroom doorknob was loose and shifted within its location when opening the door - Client #1 & #5's bathroom <ul style="list-style-type: none"> - Knob was missing on the top drawer on the left and on the right door of the vanity under the sink - Floor in front of the sink on the right side had a space between the tiles approximately 1/2 inch across the 12-inch tile - Floor to the left of the bathtub was 	V 736		

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V 736	<p>Continued From page 10</p> <p>uneven and had soft spots</p> <ul style="list-style-type: none"> - Bathtub had brown residue extending to the right of the drain approximately 9 inches and 4 inches - Client #2's bedroom <ul style="list-style-type: none"> - Light brown circular stain on the ceiling approximately 6 inches in diameter - Ceiling paint was peeling in 2 spots, each about 4 inches in - Client #3's bedroom <ul style="list-style-type: none"> - Blinds on the left window had 3 broken slats - Floor tile in front of the right window was missing leaving a gray 12-inch by 12-inch spot on the floor - Floor to the right of the door had a space between three tiles approximately 2¼ feet and 2 inches wide at the widest point - Round indentation on the wall behind the door approximately 3 inches in diameter <p>Interview on 4/17/26 client #1 reported:</p> <ul style="list-style-type: none"> - Had noticed that the floor in his bathroom was soft in spots, but it "don't bother me" - Did not use the bathroom in the hallway but had noticed the broken tile - Did not use the back deck <p>Interview on 4/17/26 client #4 reported:</p> <ul style="list-style-type: none"> - The hallway bathroom had needed to be repaired for "about 3½ months" because "I had a heavy roommate that was too heavy" - Did not use the staff/guest bathroom and had not been told to use it - Did not use the back deck and would "go out the front" when leaving the facility - Had not noticed any other issues at the facility <p>Interview on 4/21/26 client #6 reported:</p>	V 736		

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V 736	<p>Continued From page 11</p> <ul style="list-style-type: none"> - "I know there's some faults in the back door... something going on with the woodwork, so it doesn't close properly" - The hallway bathroom needed repaired since he was admitted to the facility in March 2026 - He used the hallway bathroom because "the other bathroom is for like staff and guests" and had not been told to use the staff/guest bathroom - Had not noticed anything else at the facility that needed to be repaired <p>Interviews on 4/17/26 and 4/21/26 staff #1 reported:</p> <ul style="list-style-type: none"> - The marks on the wall in the living room were caused by "I think the chair" that was in front of the smaller mark - The deck was like that when he started at the facility in March 2026 but clients did not use it and went out the front door - The hallway bathroom had needed repaired since he started at the facility in March 2026 but "clients don't use (hallway bathroom) ...I have them use staff/guest bathroom" - Did not respond when asked about the other issues at the facility despite being asked more than once - "I will tell her (Licensee) and she will call somebody" when he noticed something at the facility that needed to be repaired - Had not noticed anything else at the facility that needed to be repaired <p>Former Staff #2 was unavailable for interview because he was out of the country.</p> <p>Interviews on 4/17/26 and 4/21/26 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - Had done a walkthrough at the facility "about a month ago" - "I don't remember" the hole being in the wall 	V 736		

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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 736	<p>Continued From page 12</p> <p>of the staff/guest bathroom</p> <ul style="list-style-type: none"> - The maintenance man for the facility was coming to fix the hallway bathroom, but she did not know when - Was not aware of the issues with the back deck, back door, floors, wall, or any other issues at the facility - The Licensee was responsible for maintenance of the facility, and staff and clients were responsible for ensuring the facility was cleaned <p>Interview on 4/21/26 the Licensee reported:</p> <ul style="list-style-type: none"> - Was responsible for maintenance of the facility - Former staff #2 "went back to Africa" and the only phone number she had was "for him in Africa" - "I know the bathroom (hallway) needs work...I told them not to use that" bathroom - Replied "the guy will fix all that when he comes" when asked about remaining things at the facility that needed to be repaired and repeated "he will fix it when he comes" when asked for a specific date <p>Review on 5/11/26 of the Plan of Protection emailed to DHSR surveyor on 5/11/26 at 8:08AM with the QP signature and date by signature of 5/8/26 revealed:</p> <ul style="list-style-type: none"> - "What immediate action will the facility take to ensure the safety of the consumers in your care? As of 4/22/26, the deck was repaired. As of 6/22/26 the bathroom areas - walls, shower door, floor in the rear bathroom, vanities doors, floor, tile, etc., will be repaired, replaced or restored. Other areas to be addressed repaired, replaced, restored or painted by 6/22/26 are the holes in the ceiling in the hallway, holes/scratches in bedroom and bathroom wall, blinds in bedroom, floor tiles 	V 736		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 05/11/2026
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V 736	<p>Continued From page 13</p> <p>in bedrooms, hallway closet door and lock on door leading to deck will be replaced.</p> <p>- Describe your plans to make sure the above happens.</p> <p>The facility administrator and QP will develop an inspection process and will inspect the facility no less than monthly. Any areas identified as needing immediate attention will be forwarded to a contractor within 24 hours. Any areas that are not in need of immediate attention will be addressed (repaired, replaced, restored) within 7 days. The administrator will ensure completion as quickly as possible."</p> <p>This facility served clients with diagnoses of Schizoaffective Disorder, Schizophrenia, Cannabis Use Disorder, Elevated Blood Pressure, Insomnia, and Mild Intermittent Asthma. The facility's back deck was in disrepair including a hole approximately 4 inches by 18 inches, multiple areas of rotted and warped wood, protruding nails, a bench with a rotted seat, and a loose warped board with nails protruding. The condition of the deck rendered it unsafe for use. Inside the facility the back door did not close properly, brown stains or paint was peeling on several ceilings, a folding door not in it's track, and handles and knobs were missing from some doors and drawers throughout the facility. There were soft spots on a bathroom floor, a hole in a bathroom wall, missing or cracked floor tiles, a shower wall was not secured at its base, a sink that did not drain properly, and brown residue on shower walls and bathtubs. This deficiency constitutes a Type B rule violation which is detrimental to the health, safety and welfare of the clients and must be corrected within 45 days.</p>	V 736		