

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G195	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 05/27/2026
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NAME OF PROVIDER OR SUPPLIER VOCA-HARRISBURG ROAD GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 6620 HARRISBURG ROAD , CHARLOTTE, North Carolina, 28277
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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) COMPLETION DATE
W0104	<p>GOVERNING BODY</p> <p>CFR(s): 483.410(a)(1)</p> <p>The governing body must exercise general policy, budget, and operating direction over the facility.</p> <p>This STANDARD is NOT MET as evidenced by:</p> <p>Based on observation and interview the governing body failed to exercise general policy, budget, and operating direction over the facility relative to food supply. The finding is:</p> <p>Observations in the group home during the 5/26/26 - 5/27/26 recertification survey revealed the deep freezer to not have adequate food supplies in the home for six clients and two staff. Continued observations in the refrigerator revealed breakfast items, juice, milk, and condiments. Further observations in the top freezer revealed a few bags of vegetables. Subsequent observations in the deep freezer located next to the refrigerator revealed the following items: 8 packs of vegetables, 1 and 1/2 bag of french fries, 1 bag of chicken nuggets, 1 pepperoni pizza, 1/2 bag of fish sticks. 1 box of french toast sticks, 6 juice cans, 1/2 bag of hamburgers, 1 pot roast, 1/2 box of popsicles.</p> <p>Interview with group home staff on 5/26/26 revealed she was not sure when or how often groceries are bought for the home and this surveyor would have to ask the site supervisor.</p> <p>Interview with the facility site supervisor on 5/27/26 revealed that the grocery card gets cut off on the 25th of the month and it's reopened on the 28th. Further interview with the site supervisor verified that the freezer does look a little empty, however she is scheduled to replenish items on 5/28/26.</p> <p>Interview with the facility administrator on 5/27/26 verified that the card will be accessible on the 28th, however not having adequate food supplies in the home is not best practice for the agency.</p>	W0104		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See reverse for further instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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W0441	<p>EVACUATION DRILLS</p> <p>CFR(s): 483.470(i)(1)</p> <p>and under varied conditions to-</p> <p>This STANDARD is NOT MET as evidenced by:</p> <p>Based on document review and interviews, the facility failed to ensure fire drills were conducted under varied conditions and times throughout the shifts. The finding is:</p> <p>Review on 5/27/26 of fire drill reports for 6/25 - 5/26 revealed first, second and third shifts were not conducted at various times throughout the shifts.</p> <p>Continued review revealed first shifts drills were conducted at 10:03 AM on 4/26/26, 10:00 AM on 1/21/26, 10:00 AM on 10/17/25, and 10:00 AM on 7/15/25.</p> <p>Further review revealed on second shift drills were conducted at shift at 5:30 PM on 5/20/26, 5:03 PM on 2/11/26, 4:03 PM on 10/7/25, 5:00 PM on 8/20/25.</p> <p>Subsequent review revealed third shift drills were conducted at 4:07 AM on 3/18/26, 4:00 AM on 12/12/25, 4:00 AM on 9/10/25 and 3:00 AM on 6/29/25.</p> <p>Interview on 5/27/26 with facility site supervisor revealed that she wasn't made aware that fire drills needed to be conducted at varied times throughout the shift. Further interview with the interim qualified intellectual disabilities professional (QIDP) revealed fire drills needs to be completed at varied times throughout shifts.</p>	W0441		