Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION COMPLETED **IDENTIFICATION NUMBER:** A. BUILDING: _ B. WING MHL091-061 02/22/2019 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 264 S BECKFORD DRIVE **ROANOKE AVENUE GROUP HOME** HENDERSON, NC 27536 PROVIDER'S PLAN OF CORRECTION SUMMARY STATEMENT OF DEFICIENCIES (X5) COMPLETE (X4) ID (EACH CORRECTIVE ACTION SHOULD BE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY V 000 V 000 INITIAL COMMENTS An annual survey was completed February 22, DHSR - Mental Health 2019. A deficiency was cited. This facility is licensed for the following service MAR 0 6 2019 category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. Lic. & Cert. Section V 752 V 752 27G .0304(b)(4) Hot Water Temperatures SEE ATTACHED

PLAN OF

COMMECTION 10A NCAC 27G .0304 FACILITY DESIGN AND **EQUIPMENT** (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to maintain the temperature of the water between 100-116 degrees Fahrenheit. The findings are: Observation on 2/21/18 starting at 2:20pm revealed: - the temperature at the kitchen sink registered 90 degrees Fahrenheit - the temperature was measured several times between 2:20pm and 3:00pm and always registered at 90 degrees - the Residential Manager measured the temperature at the same time with her thermometer and that also showed 90 degrees Fahrenheit

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

EXECUTIVE DINECTON

If continuation sheet 1 of 2

Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY STATEMENT OF DEFICIENCIES COMPLETED IDENTIFICATION NUMBER: AND PLAN OF CORRECTION A. BUILDING: _ B. WNG_ 02/22/2019 MHL091-061 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 264 S BECKFORD DRIVE **ROANOKE AVENUE GROUP HOME** HENDERSON, NC 27536 PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PREFIX (EACH CORRECTIVE ACTION SHOULD BE (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) V 752 V 752 Continued From page 1 During an interview on 2/21/19, the Residential Manager reported: - they had been taking the water temperatures weekly and it was always at approximately 110 degrees Fahrenheit - she would submit a work order immediately for someone at HUD (Housing and Urban Development who owned the home) to adjust the temperature

Division of Health Service Regulation

STATE FORM

IY7L11

Plan of Correction

Date of Correction: March 31, 2019

Deficiency Cited: V118: 10A NCAC 27G.0304 Facility Design and Equipment. The facility failed to maintain the temperature of the water between 100-116 degrees Fahrenheit.

Provider's Plan of Correction: D. D. Residential Services Inc. will assure that each facility shall be designed, constructed, and equipped in the manner that ensures the physical safety of clients, staff and visitors. In areas of the facility where clients are exposed to hot water, the temperature shall be maintained between 100 - 116 degrees Fahrenheit. Systematic changes will be implemented whereby the staff will test the hot water twice daily, document it on a log, and report any deviations from the 100 - 110 degrees to the Residential Manager. The Residential Manager will make arrangements to contact maintenance to adjust the hot water heater or mixing valves to assure the steady balance of water at 100 - 116 degrees. The Executive Director will monitor the quality of the home for effectiveness through monthly Supervision of the Residential Manager and walk through of the home.

Responsible Parties: Direct Support Professional Staff, Residential Manager, Executive Director

Correction Date: 3/31/2019

Provider Signature:

D. D. Residential Services, Inc. Administrative Office

Post Office Box 88 Henderson, North Carolina 27536 (252) 438-6700 Fax (252)438-6720

DHSR - Mental Health

MAR 0 6 2019

March 4, 2019

Lic. & Cert. Section

Mental Health Licensure and Certification Section NC Division of Health Service Regulation 2718 Mail Service Center Raleigh, NC 27699-2718

Dear Sir/Madam,

Please find enclosed the plan of correction for the standard level deficiency cited at the Roanoke Avenue Group Home, Located at 264 S. Beckford Drive, Henderson, NC 27536. This is in conjunction with MHL #: 091-061.

You shall find upon return that the deficiency cited has been addressed globally and the correction has been made prior to the correction date of March 31, 2019. Should you have any questions or concerns, please do not hesitate to contact me at the number provided. We thank you for your feedback, and welcome your return.

Sincerely,

Jacinta Johnson

Executive Director

Franklin County Group Home Vance Adult Group Home Warren County Group Home Graham Ave Group Home Louisburg Group Home Oxford Group Home Roanoke Avenue Group Home

