

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL011-390</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>10/03/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE CENTER FOR SPIRITUAL EMERGENCE &amp;</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>370 NORTH LOUISIANA AVENUE, SUITES D3 &amp; D4</b> <b>ASHEVILLE, NC 28806</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on 10/3/19. Deficiencies were cited. Current census in 3600 program was 306.</p> <p>This facility is licensed for the following service categories:            10A NCAC 27G .1100 Partial Hospitalization for Individuals who are Acutely Mentally Ill.            10A NCAC 27G .3700 Day Treatment for Individuals with Substance Abuse Disorders.            10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program.            10A NCAC 27G .5400 Day Activity for Individuals of All Disability Groups.            10A NCAC 27G .3600 Outpatient Opioid Treatment.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS            (f) Continuing education shall be documented.            (g) Employee training programs shall be provided and, at a minimum, shall consist of the following:            (1) general organizational orientation;            (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;            (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and            (4) training in infectious diseases and bloodborne pathogens.            (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid</p>	V 108		

Division of Health Service Regulation  
 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

Division of Health Service Regulation

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V 108	<p>Continued From page 1</p> <p>including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on personnel record reviews and interviews, the facility failed to ensure each staff were provided timely training on the mental health/substance abuse (MH/SA) needs of each client as specified in the treatment habilitation plan, client rights and confidentiality, and infectious diseases/blood borne pathogens for 1 of 4 current staff sampled. The findings are:</p> <p>Review on 10/3/2019 of the facility's Policy and Procedure Manual revealed: -Page 19 states that required core competency trainings and addiction specific trainings must be completed within 45 days from the date of hire.</p> <p>Review on 10/3/19 of staff #2's personnel record revealed: - Hire Date: 4/1/19. - Job Title: Certified Substance Abuse Counselor-Registered (CSAC-R). -Client Rights Training completed 5/20/19 (49 days after date of hire). -Blood Borne Pathogens Training completed</p>	V 108		

Division of Health Service Regulation

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V 108	Continued From page 2  5/24/19 (53 days after date of hire). -Client Specific Training on diagnostic criteria from the Diagnostic and Statistical Manual (DMS) completed on 5/30/19 (59 days after date of hire).  Interview on 10/3/19 with the Licensee revealed: -The facility staff that managed human resources left the agency and personnel record requirements were not done in a timely manner, to include completion of required orientation trainings listed on the "Orientation Tracker" check list included in personnel files. -The Licensee will now ensure all required trainings will fall within the facility's policy and procedure guidelines of 45 days from date of hire.	V 108		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification  G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.  This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure each staff member had no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry (HCPR) prior to hire for 2 of 4 sampled	V 131		

Division of Health Service Regulation

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V 131	<p>Continued From page 3</p> <p>staff (#1 and #3). The findings are:</p> <p>Review on 10/3/19 of staff #1's personnel record revealed: - Hire Date: 8/21/19. - Job Title: Certified Substance Abuse Counselor-Registered (CSAC-R). -Job duties included provision of counseling services to clients. -HCPR check dated 8/24/18.</p> <p>Review on 10/3/19 of staff #3's personnel record revealed: - Hire Date: 9/16/19. - Job Title: Administrative Assistant. -Job duties included direct client contact, observing urine drug screens as needed, and access to client medical records/personal Health Information (PHI). -HCPR check dated 10/3/19.</p> <p>Interview on 10/3/19 with the Licensee revealed: -The facility staff that managed human resources left the agency and personnel record requirements were not done in a timely manner. -Licensee stated he would complete Staff #3's HCPR check with surveyors on site to evidence that it had been completed and was now in the personnel record.</p>	V 131		
V 133	<p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT. (a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse</p>	V 133		

Division of Health Service Regulation

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V 133	Continued From page 4  services that is licensable under Article 2 of this Chapter. (b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 5</p> <p>information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <ol style="list-style-type: none"> <li>(1) The level and seriousness of the crime.</li> <li>(2) The date of the crime.</li> <li>(3) The age of the person at the time of the conviction.</li> <li>(4) The circumstances surrounding the commission of the crime, if known.</li> <li>(5) The nexus between the criminal conduct of the person and the job duties of the position to be filled.</li> </ol>	V 133		
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Division of Health Service Regulation

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V 133	<p>Continued From page 6</p> <p>(6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.</p> <p>(7) The subsequent commission by the person of a relevant offense.</p> <p>The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</p> <p>(2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers;</p>	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 7</p> <p>Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record</p>	V 133		



Division of Health Service Regulation

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V 133	<p>Continued From page 8</p> <p>check regarding the applicant if both of the following requirements are met:                      (1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.                      (2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by:                      Based on record review and interviews, the facility failed to request a criminal background check within five days of a conditional offer of employment for 2 of 4 sampled staff (#1 and #3).                      The findings are:</p> <p>Review on 10/3/19 of staff #1's personnel record revealed:                      - Hire Date: 8/21/19.                      -Criminal Background check ordered on 12/28/18.</p> <p>Review on 10/3/19 of staff #3's personnel record revealed:                      - Hire Date: 9/16/19.                      -Criminal Background check not completed.</p> <p>Interview on 10/3/19 with the Licensee revealed:                      -The facility staff that managed human resources left the agency and personnel record</p>	V 133		

Division of Health Service Regulation

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V 133	Continued From page 9  requirements were not done in a timely manner. -Staff #3's criminal record will be submitted immediately.	V 133		
V 235	27G .3603 (A-C) Outpt. Opiod Tx. - Staff  10A NCAC 27G .3603 STAFF (a) A minimum of one certified drug abuse counselor or certified substance abuse counselor to each 50 clients and increment thereof shall be on the staff of the facility. If the facility falls below this prescribed ratio, and is unable to employ an individual who is certified because of the unavailability of certified persons in the facility's hiring area, then it may employ an uncertified person, provided that this employee meets the certification requirements within a maximum of 26 months from the date of employment. (b) Each facility shall have at least one staff member on duty trained in the following areas: (1) drug abuse withdrawal symptoms; and (2) symptoms of secondary complications to drug addiction. (c) Each direct care staff member shall receive continuing education to include understanding of the following: (1) nature of addiction; (2) the withdrawal syndrome; (3) group and family therapy; and (4) infectious diseases including HIV, sexually transmitted diseases and TB.  This Rule is not met as evidenced by: Based on personnel record reviews and interviews, the facility failed to ensure that each	V 235		

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V 235	<p>Continued From page 10</p> <p>direct care staff were provided timely continuing education on topics specific to Outpatient Opioid Treatment to include nature of addiction, withdrawal syndrome, group and family therapy, and infectious diseases including HIV, sexually transmitted diseases and Tuberculosis (TB) for 1 of 4 current staff sampled. The findings are:</p> <p>Review on 10/3/2019 of the facility's Policy and Procedure Manual revealed: -Page 19 states that required core competency trainings and addiction specific trainings must be completed within 45 days from the date of hire.</p> <p>Review on 10/3/19 of staff #2's personnel record revealed: - Hire Date: 4/1/19. - Job Title: Certified Substance Abuse Counselor-Registered (CSAC-R). -Nature of Addiction training completed 5/22/19 (51 days after date of hire). -Withdrawal Syndrome training completed 5/22/19 (51 days after date of hire). -Group and Family Therapy training completed 5/30/19 (59 days after date of hire). - Infectious Diseases training completed 5/24/19 (53 days after date of hire).</p> <p>Interview on 10/2/19 with staff #2 revealed: -Was a Peer Support Specialist (PSS) and received continuing education training for that certification. -Weekly supervision covered training topics such as group and family therapy, addiction and withdrawal symptoms.</p> <p>Interview on 10/3/19 with the Licensee revealed: -The facility staff that managed human resources left the agency and personnel record requirements were not done in a timely manner,</p>	V 235		

Division of Health Service Regulation

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V 235	Continued From page 11  to include completion of required orientation trainings listed on the "Orientation Tracker" check list included in personnel files. -The "Orientation Tracker" included required training topics on Addiction, Withdrawal, and Infectious Diseases/Blood Borne Pathogens. -Group and Family Therapy was included in training agendas for "12 Core Functions for CSACs" and in "Treatment Protocols/Tips 40, 43, and 47" published by Substance Abuse and Mental Health Services Administration (SAMHSA). -The "Orientation Tracker" checklist will be revised to include "Group and Family therapy" training to ensure it's covered for all staff and to make the required training topic clearly identifiable as having been completed. -The Licensee will now ensure all required trainings will fall within the facility's policy and procedure guidelines of 45 days from date of hire.	V 235		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int.  10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.	V 536		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL011-390</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>10/03/2019</b>
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V 536	<p>Continued From page 12</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> <li>(1) knowledge and understanding of the people being served;</li> <li>(2) recognizing and interpreting human behavior;</li> <li>(3) recognizing the effect of internal and external stressors that may affect people with disabilities;</li> <li>(4) strategies for building positive relationships with persons with disabilities;</li> <li>(5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;</li> <li>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</li> <li>(7) skills in assessing individual risk for escalating behavior;</li> <li>(8) communication strategies for defusing and de-escalating potentially dangerous behavior; and</li> </ol>	V 536		

Division of Health Service Regulation

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V 536	<p>Continued From page 13</p> <p>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee</p>	V 536		

Division of Health Service Regulation

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V 536	<p>Continued From page 14</p> <p>performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p>	V 536		

Division of Health Service Regulation

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V 536	<p>Continued From page 15</p> <p>This Rule is not met as evidenced by: Based on personnel record review and staff interviews, the facility failed to ensure that all staff completed training in alternatives to restrictive intervention prior to providing services for 4 of 4 sampled staff (#1, #2, #3, and the Licensed Practical Nurse). The findings are:</p> <p>Review on 10/3/19 of staff #1's personnel record revealed: - Hire Date: 8/21/19. - Nonviolent Crisis Intervention (NCI) Training completed 6/26/19.</p> <p>Review on 10/3/19 of staff #2's personnel record revealed: - Hire Date: 4/1/19. - Nonviolent Crisis Intervention (NCI) Training completed 6/8/19.</p> <p>Review on 10/3/19 of staff #3's personnel record revealed: - Hire Date: 9/16/19. -No verification of completion of training on alternatives to restrictive interventions from an approved curriculum was included in the record.</p> <p>Review on 10/3/19 of the Licensed Practical Nurses' (LPN) personnel record revealed: - Hire Date: 10/15/18. - Nonviolent Crisis Intervention (NCI) Training completed 6/8/19.</p> <p>Interview on 10/3/19 with the Licensee revealed: -The facility staff received annual trainings in October of each year for Nonviolent Crisis Intervention (NCI) and Staff #3 was scheduled to complete NCI on 10/7/19. -Was aware this training is required for staff prior</p>	V 536		



Division of Health Service Regulation

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V 536	Continued From page 16 to providing services to clients.	V 536		
V 752	<p>27G .0304(b)(4) Hot Water Temperatures</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT</p> <p>(b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors.</p> <p>(4) 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.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to maintain the hot water temperatures between 100 - 116 degrees Fahrenheit (F) in areas where clients were exposed to water. The findings are:</p> <p>Observation on 10/2/19 at 1:30 p.m. of the hot water temperature in the client bathroom revealed the hot water measured 80 degrees F.</p> <p>Observation on 10/2/19 at 1:45 p.m. of the hot water temperature in the Program Director's office, where a client was observed to go in, measured 99 degrees F.</p> <p>Interview on 10/3/19 with the Program Director revealed: -he had worked on the hot water heater last night and the temperatures should be corrected.</p> <p>The temperatures were tested again on 10/3/19 at 1:45 p.m. the client bathroom revealed 118</p>	V 752		

Division of Health Service Regulation

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V 752	Continued From page 17  degrees F. At 1:46 p.m.. the Program Director's office revealed 70 degrees F.	V 752		