PRINTED: 12/16/2019 FORM APPROVED

Division of Health Service Regulation

NAME OF PROVIDER OR SUPPLIER INREACH/GREYWOOD DRIVE (X4) ID SUMMARY STATEMENT OF DEFICIENCIES NHL060-157 STREET ADDRESS, CITY, STATE, ZIP CODE 4922 GREYWOOD DRIVE CHARLOTTE, NC 28212 (X4) ID PROVIDER'S PLAN OF CORRECTION (X5)		OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:	CONSTRUCTION	(X3) DATE SURVEY COMPLETED	
NAME OF PROVIDER OR SUPPLIER INREACH/GREYWOOD DRIVE (X4) ID PREFIX TAG SUMMARY STATEMENT OF DEFICIENCIES PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION)				7 20.25		R	
INREACH/GREYWOOD DRIVE CHARLOTTE, NC 28212 (2A) ID SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S PLAN OF CORRECTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DATE			MHL060-157	B. WING			
CHARLOTTE, NC 28212 CHARLOTTE, NC 28212	NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE						
(X4) ID PREFIX TAG SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) V 000 INITIAL COMMENTS V 000	I INREACH/GREYWOOD DRIVE						
PREFIX TAG (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) V 000 INITIAL COMMENTS A limited follow up survey for a type A1 was completed on 12-9-19. This was a limited follow up survey, only 10A NCAC 27 G .0201 Governing Body Policies (V105), 10A NCAC 27G .0204 Competencies and Supervision of Paraprofessionals (V110) crossed referenced into 10A NCAC 27G .0204 Competencies and Supervision of Poroprofessionals (V105), 10A NCAC 27G .0201 Governing Body Policies (V105), 10A NCAC 27G .0201 Governing Body Policies (V105), 10A NCAC 27G .0201 Governing Body Policies (V105), 10A NCAC 27G .0204 Competencies and Supervision of Paraprofessionals (V110) crossed referenced into 10A NCAC 27G .0204 Competencies and Supervision of Paraprofessionals (V110) crossed referenced into 10A NCAC 27G .5603 Operations (V291). No deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G 5600 Supervised Living for Adults Whose Primary Diagnosis is a	CHARLOTTE, NC 28212						
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Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

(X6) DATE TITLE