Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED							
		MHL001-217	B. WING		01/2	8/2020						
NAME OF I	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE								
WICKER STREET GROUP HOME 809 WICKER STREET												
WICKER STREET GROUP HOME BURLINGTON, NC 27217												
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRO DEFICIENCY)	LD BE	(X5) COMPLETE DATE						
V 000	00 INITIAL COMMENTS		V 000									
	2020. A deficiency was This facility is licens category:	sed for the following service										
	Adults with Mental I	00A Supervised Living for Illness.										
V 752	27G .0304(b)(4) Ho	t Water Temperatures	V 752									
	EQUIPMENT (b) Safety: Each fa constructed and eq ensures the physica visitors. (4) In areas cexposed to hot water	cility shall be designed, uipped in a manner that al safety of clients, staff and of the facility where clients are er, the temperature of the tained between 100-116 t.										
	failed to maintain th	et as evidenced by: on and interview the facility he facility water temperature egrees Fahrenheit. The										
	revealed: -Kitchen sink water FahrenheitBathroom #1 water degrees Fahrenheit	r temperature was 120										
	Interview on 1/28/20 revealed:	0 with the Director/Owner										

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

(X6) DATE TITLE

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V 752	-They had recently couple of months a -Residents were ab temperatures them -They adjusted the the clientsHot water had bee -They had been tak temperatures and t between 114-120 d -Plumber was sche water heater later ir -She confirmed the	moved into the house a go. ble to adjust water selves, but one. water temperature for one of n fluctuating daily. king weekly water hey all had registered to be egrees Fahrenheit. duled to work on regulating the afternoon. facility failed to maintain the trature between 100-116	V 752									

Division of Health Service Regulation STATE FORM