

Appendix 1-B: Plan of Correction Form

Plan of Correction			
<p>Please complete <u>all</u> requested information and email completed Plan of Correction form to:</p> <p style="margin-top: 10px;">Plans.Of.Correction@dhhs.nc.gov</p>			
Provider Name:	Maplewood Facility	Phone:	252-233-0491
Provider Contact Person for follow-up:	Kimberly Manning, RN Director of PRTF Services	Fax:	252-233-0495
Survey completed:	02/28/20	Email:	kmanning@novaprtf.com
Intake Number:	NC00160111		
Address:	2002 G Shackelford Road, Kinston, NC 28504		Provider # MHL054-159
Finding	Corrective Action Steps	Responsible Party	Time Line
V 752 27G .0304 (b) (4) Hot Water Temperatures 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT	The hot water temperature in Maplewood will be adjusted and monitored to ensure that a temperature is maintained between 100-116 degrees Fahrenheit. Once a week, the Facility Services Coordinator will measure water temperatures from all faucets within the home. The temperatures will be recorded. If any temperature reading is outside of set required parameters, the Maintenance Manager will be notified to adjust the temperature setting accordingly. Maintenance Request forms will demonstrate any repairs / adjustments. The Program Director will monitor the work of the Facility Support Coordinator and Maintenance Manager.	Kimberly Manning, RN Director of PRTF Services	Implementation Date: 2/28/20 Projected Completion Date: 4/28/20