

NOV 15 2020

Lic. & Cert. Section

Appendix 1-B: Plan of Correction Form

Plan of Correction

Please complete all requested information and email completed Plan of Correction form to:

Plans.Of.Correction@dhhs.nc.gov

Provider Name:	Bradley Home	Phone:	919 649-5439
Provider Contact Person for follow-up:	Cordelia Akagha	Fax:	
		Email:	
Address:	P.O. Box 2055 Garner, NC		Provider # MHL#092-610

Finding	Corrective Action Steps	Responsible Party	Time Line
10A NCAC 27G.0303 Location and Exterior Based on observation and interview, the licensee failed to maintain the facility in a clean, attractive and orderly manner.	The facility will correct all items that need to be repaired and/or discarded. A Handy Man will be employed to repair items that need to be corrected. Items broken will be replaced. The Director will ensure that all areas meet the standard of the location and exterior requirement.	Cordelia Akagha, Director	Implementation Date: 10/09/2020 Projected Completion Date: 11/5/2020
	<i>Cordelia Akagha, Director</i>		<i>10/9/20</i>