

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-812</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/02/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>RAINBOW OF SUNSHINE 2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>307 CEDARWOOD STREET SPRING LAKE, NC 28390</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on July 2, 2021. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p>	V 000		
V 736	<p><b>27G .0303(c) Facility and Grounds Maintenance</b></p> <p><b>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</b></p> <p>(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 07/01/21 at approximately 10:00am revealed:</p> <ul style="list-style-type: none"> <li>- The rear door in client #2 and client #4's bedroom was not able to be opened.</li> <li>- The glass window in client #2 and client #4's bedroom was broken and cracked.</li> <li>- The air return vent in the living room area was rusted.</li> </ul> <p>Interview on 07/01/21 staff #1 stated:</p> <ul style="list-style-type: none"> <li>- He was not able to get the rear door in client #2 and client #4's bedroom opened.</li> <li>- Client #2 had broken the bedroom window approximately 2 weeks ago when she got mad at</li> </ul>	V 736		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 736	Continued From page 1  client #4.  Interview on 07/01/21 the Licensee stated: - She understood the window in client #2 and client #4's bedroom needed to be repaired for safety. - She would ensure the bedroom window was repaired.  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 736		
V 752	27G .0304(b)(4) Hot Water Temperatures  10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (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.  This Rule is not met as evidenced by: Based on observation and interviews, the facility water temperatures were not maintained between 100-116 degrees Fahrenheit in areas where clients were exposed to hot water. The findings are:  Observation on 07/01/21 at approximately 10:00am of water temperatures in the facility revealed: - The hot water temperature in client #2 and client #4's bathroom was 96 degrees Fahrenheit. - The client bathroom in the hallway revealed a	V 752		

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V 752	<p>Continued From page 2</p> <p>hot water temperature of 96 degrees Fahrenheit.</p> <p>Interview on 07/01/21 the Qualified Professional stated: - He had recently turned the water temperature down. - He would adjust the water temperature to the required range per rule.</p> <p>Interview on 07/02/21 the Licensee stated she would ensure the water temperature is within the required range per rule.</p>	V 752		