

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-969	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/18/2022
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NAME OF PROVIDER OR SUPPLIER ALEXANDER YOUTH NETWORK - OAK UNIT PRTF	STREET ADDRESS, CITY, STATE, ZIP CODE 6220-A THERMAL ROAD CHARLOTTE, NC 28211
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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>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on 3/18/22. The complaint was unsubstantiated (Intake #NC 00185089). Deficiencies were cited.</p> <p>The facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment Facility for Children and Adolescents.</p> <p>This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 750	<p>Upon observation, one smoke alarm in Oak Cottage was missing both a front cover and battery, the PRTF supervisor submitted a Kace-Ticket (agency repair request) to the maintenance department on 3/10/22. On 3/17/22, maintenance confirmed that the smoke detector issues had been corrected in addition to other repairs.</p> <p>Additionally, the PRTF supervisors will schedule a refresher course with Oak cottage staff to review the agency Kace-Ticket reporting and notification function. This review will include: assessing and identifying repairs and/or unsafe issues and reporting each concern through our internal Kace-Ticket reporting system to ensure the issue is repaired/corrected. This review will occur no later than 5/16/2022.</p>	5/16/2022

DHSR - Mental Health

APR 11 2022

Lic. & Cert. Section

Karen Dubois
4-7-22

V 750	<p>27G .0304(b)(3) Maintenance of Elec., Mech., & Water Systems</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT</p> <p>(b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors.</p> <p>(3) Electrical, mechanical and water systems shall be maintained in operating condition.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure electrical and mechanical systems were maintained in operating conditions. The findings are:</p> <p>Observations on 3/9/22 at approximately 12:27pm revealed: - Smoke detector was missing front cover outside of client #1's bedroom;</p>	V 750	
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Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

STATE FORM 6899 2T2P 11 If continuation sheet 1 of 2

PRINTED: 03/25/2022
FORM APPROVED

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V 750	<p>Continued From page 1</p> <ul style="list-style-type: none"> - There were no batteries in smoke detector. <p>Interview on 3/9/22 with the Supervisor revealed:</p> <ul style="list-style-type: none"> - Unaware the front cover of the smoke detector was missing; - Didn't know how long the front cover of smoke detector was missing. <p>Interview on 3/18/22 with the Program Director revealed:</p> <ul style="list-style-type: none"> - Was unaware the front cover was missing; - Didn't know how long it was missing; - Staff was not aware it was missing; - Reported it is now fixed at exit interview. 	V 750		
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