Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER A. BUILDING: COMPLETED MHL0601048 05/18/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **5212 SWEARINGTON ROAD** MIRACLE HOUSES-SWEARINGAN CHARLOTTE, NC 28216 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual and follow up survey was completed on 5-18-22. Deficiences were cited. This facility is licensed for the following service category: 10A NCAC 27G 1700 Residential Treatment Staff Secure for Children and Adolescents. This facility is licensed for four and currently has a census of four. The survey sample consisted of three current clients. 27G. 0304(b)(4) V 752 27G .0304(b)(4) Hot Water Temperatures V 752 To correct the water temperature being too hot, the level was immediately turned down to a lower 10A NCAC 27G .0304 FACILITY DESIGN AND setting. In order to prevent the water temperature **EQUIPMENT** from being above 116 degrees, staff will conduct (b) Safety: Each facility shall be designed, 5.18.22 daily checks of the water heater to observe the constructed and equipped in a manner that level of heat that it is set on, in addition to checking ensures the physical safety of clients, staff and the water temperature itself, which is currently visitors. being completed and logged. In areas of the facility where clients are If the setting on the water heater is above what is exposed to hot water, the temperature of the recommended, staff will immediately turn it down. water shall be maintained between 100-116 This check will be done daily, on every shift, and degrees Fahrenheit. documented in a log. The house manager will ensure the log is being completed daily and the qualified professional will randomly conduct checks as well. This Rule is not met as evidenced by: Based on record review, observations and interview, the facility failed to ensure in areas of the facility where clients were exposed to hot water, the temperature of the water was maintained between 100-116 degrees Fahrenheit. The findings are: Observation on 5-18-22 at approximately 5:00 pm -Hot water temperature in the kitchen sink was 124 degrees. -Hot water in the left and right bathroom sink Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

9PWX11

If continuation sheet 1 of 2

Division of Health Service Regulation

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING | | (X3) DATE SURVEY COMPLETED R 05/18/2022 | |
|---|---|---|---|-------------------------|--|--|
| | | MHL0601048 | | | | |
| NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE MIRACLE HOUSES-SWEARINGAN CHARLOTTE, NC 28216 | | | | | | |
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | | ID PREFIX TAG | (EACH CORRECTIVE ACTION | R'S PLAN OF CORRECTION (X5) RECTIVE ACTION SHOULD BE COMPLETE RENCED TO THE APPROPRIATE DATE DEFICIENCY) | |
| V 752 | was 129 degreesHot water in the Interview on 5-17-22 arevealed: -The facility was hot water, and electriceHe did not think could adjust it himself Interview on 5-17-22 are the word of the would not elaborate. Client #3 was unavailabeing AWOL (absent to the professional revealed and the professional | bathtub was 129 degrees. and 5-18-22 with Client #1 fine, they always had heat, city. the water was too hot, as he with Client #2 revealed: roblems with the facility but e. able to be interviwed due to without leave). with the Qualified: necked the hot water d it the previous night and it sure the checked the hot o make sure no one was | V 752 | | | |