

CH 1015
NPT

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SEP 07 2022

PLAN OF CORRECTION

You may create your own template, however, it must contain the elements listed below.

DHSR-MH Licensure Sect

| PROVIDER NAME: DAYMARK Recovery Services | | SUBMITTED BY: Tianna Gregory LCSW, LCAS | | DATE OF REVIEW: 7/7/2022 | |
|---|--|--|--|---------------------------------|--|
| ITEM(S) CITED OUT OF COMPLIANCE* | CORRECTIVE ACTION: Please include any attachments related to corrective action implemented and/or supporting documentation. | | RESPONSIBLE PERSON | DATE IMPLEMENTED | |
| V736 27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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. | <ol style="list-style-type: none"> Center Director will continue collaborating with Senior Management to determine arrangements for long term floor replacement/care. Support Supervisor made contact with [REDACTED] Daymark Maintenance Manager who arranged floor cleaning service with county. Dining room floors were cleaned and buffed on 8/8/2022. Floor protectors were placed on dining room chairs to prevent further scraping. Clinical Director and Support Supervisor will ensure that consistent upkeep of the flooring is maintained by appropriate cleaning services. | | [REDACTED] LCSW, LCAS (Center Director) [REDACTED] (Support Supervisor) [REDACTED] (Clinical Team Lead) [REDACTED] (RW Supervisor) | 8/8/2022 Ongoing | |

*Address all items scored Not Met during the review.

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| <p>V750</p> <p>27G .0304(b)(3) Maintenance of Elec., Mech., & Water Systems</p> <p>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. (3) Electrical, mechanical and water systems shall be maintained in operating condition.</p> | <ol style="list-style-type: none"> 1. County facility maintenance reported to the facility and replaced all fluorescent lighting in client bedrooms. 2. County maintenance will check on electrical and lighting weekly. 3. Support Supervisor will be responsible for keeping in touch with county facility maintenance to ensure that follow-up is timely in regards to any electrical concerns. | <p>[REDACTED] LCSW, LCAS (Center Director)</p> <p>[REDACTED] (Support Supervisor)</p> <p>[REDACTED] (Clinical Team Lead)</p> <p>[REDACTED] (RW Supervisor)</p> | <p>7/8/2022 Ongoing</p> <p style="text-align: right; color: blue; font-weight: bold;">RECEIVED</p> <p style="text-align: right; color: red;">SEP 07 2022</p> <p style="text-align: right; color: blue;">DHSR-MH Licensure Sect</p> |
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*Address all items scored Not Met during the review.

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| <p>V752</p> <p>27G .0304(b)(4) Hot Water Temperatures</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>(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.</p> | <ol style="list-style-type: none"> 1. Support Supervisor contacted plumbing service. On 7/12/22 the plumbing service came and regulated all water temperatures in the building. 2. RW Supervisor, RW Shift Lead and Support Supervisor will keep a weekly log of water temperature readings. 3. RW Supervisor, RW Shift Lead will immediately follow-up to with any client complaints or concerns regarding water temps to the Support Supervisor. 4. Support Supervisor will be responsible for keeping in touch with county facility maintenance to ensure that follow-up is timely in regards to water temperature concerns. | <p>[REDACTED] LCSW, LCAS (Center Director)</p> <p>[REDACTED] (Support Supervisor)</p> <p>[REDACTED] (Clinical Team Lead)</p> <p>[REDACTED] (RW Supervisor)</p> | <p>7/12/2022 Ongoing</p> |
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*Address all items scored Not Met during the review.

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411015 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 07/07/2022 |
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| NAME OF PROVIDER OR SUPPLIER DAYMARK GUILFORD RESIDENTIAL TREATMENT FA | STREET ADDRESS, CITY, STATE, ZIP CODE 5209 WEST WENDOVER AVENUE HIGH POINT, NC 27265 |
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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 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on 7/7/2022. The complaint was substantiated (intake #NC189365). Deficiencies were cited.</p> <p>This facility is licensed for the following service categories: - 10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders; and - 10A NCAC 27G .5600E Supervised Living for Adults with Substance Abuse Dependency.</p> <p>This facility is licensed for 56 and has a census of 21. The survey sample consisted of audits of 3 current clients.</p> | V 000 | | |
| V 736 | <p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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 observations and interviews, the facility was not maintained in a safe, clean and attractive manner. The findings are:</p> <p>Observation from approximately 1:20pm to 2:45pm on 7/6/2022 of the facility and it's grounds revealed: - The dining room floor was heavily stained with black scuffs and scratches throughout the room;</p> | V 736 | | |

07/14/2022

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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| V 736 | <p>Continued From page 1</p> <ul style="list-style-type: none"> - Floor tiles in multiple client bathrooms had stains on the floors near toilets and showers; - Floor tiles were scuffed ad cracked in multiple areas of the facility. <p>Observation from approximately 3:00pm to 3:30pm on 7/7/2022 of the interior of the facility revealed:</p> <ul style="list-style-type: none"> - Brown stains were present on the carpet in multiple areas of the facility, including the management staff office hallway, the hallway outside of the nurse's office and medical records, and the medical records staff office' - The linoleum-type tiles in the staff break room, the front lobby, and the classroom were scuffed and stained; - The classroom had a floor to ceiling sliding divider wall with a cardboard sign taped over it with "Please do not move" handwritten on it. <p>Interviews on 7/6/2022 and 7/7/2022 with the Support Supervisor revealed:</p> <ul style="list-style-type: none"> - The Local County Government (the County) owned the building. - The floors in the facility used to be waxed regularly, but over time, the surface became so worn that they could no longer be waxed. - Estimates for replacing the flooring throughout the building had been obtained approximately 6 months ago and again approximately one month ago. - The company that gave the estimate 6 months ago later said the job was too big for them. - The current estimates were still being reviewed by management and the County. <p>Interview on 7/7/2022 with the Residential Manager revealed:</p> <ul style="list-style-type: none"> - The divider in the classroom was broken and should not be opened due to concerns about it | V 736 | | |

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| V 736 | Continued From page 2 falling on someone. Interviews on 7/6/2022 and 7/7/2022 with the Director revealed: - The County owned the building. - The estimates for replacement of the flooring throughout the building were still being reviewed by the Licensee and the County. | V 736 | | |
| V 750 | 27G .0304(b)(3) Maintenance of Elec., Mech., & Water Systems 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. (3) Electrical, mechanical and water systems shall be maintained in operating condition. This Rule is not met as evidenced by: Based on observation and interviews, the facility's electrical system was not maintained in operating condition. The findings are: Observation from approximately 1:20pm to 2:45pm on 7/6/2022 of the facility and it's grounds revealed: - The wall-mounted fluorescent lights in 9 of 14 observed client bedrooms and bathrooms were either very dim or required the light switches to be flipped off and back on multiple times before they would turn on. | V 750 | | |

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| V 750 | Continued From page 3 Interview on 7/6/2022 with Client #1 revealed: - It sometimes took a few minutes before the lights in her bedroom turned on after she flipped the switch. Interview on 7/6/2022 with Client #3 revealed: - One of the lights in her bedroom "is getting ready to go out ..." Interviews on 7/6/2022 and 7/7/2022 with the Support Supervisor revealed: - The Local County Government (the County) owned the building. - The County had begun replacing light ballasts in clients' bedrooms and bathrooms after issues with them turning on were identified on 7/6/2022. Interviews on 7/6/2022 and 7/7/2022 with the Director revealed: -She was not aware that the light fixtures in client bedrooms were not working correctly. - She would ensure that the lights were repaired. | V 750 | | |
| 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's | V 752 | | |

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| V 752 | <p>Continued From page 4</p> <p>hot water was not maintained between 100-116 degrees Fahrenheit (F) in areas where clients were exposed to hot water. The findings are:</p> <p>Observation from approximately 1:20pm to 2:45pm on 7/6/2022 of the facility's hot water temperatures in clients' bedroom and bathroom areas revealed:</p> <ul style="list-style-type: none"> - Client bedrooms were double-occupancy with individual sinks in each bedroom and a shared shower room between each two adjacent bedrooms. - The hot water temperatures in 13 random bedrooms and shower areas ranged between 120-126 degrees F. <p>Interview on 7/6/2022 with Client #1 revealed:</p> <ul style="list-style-type: none"> - The hot water was "sometimes" too hot. - She was able to adjust the water temperature without assistance. <p>Interviews on 7/6/2022 and 7/7/2022 with the Residential Manager revealed:</p> <ul style="list-style-type: none"> - The hot water temperature was checked once a month. - "Mixers" were installed in the hot water lines in November of 2021. - The mixer was a device on the hot water line near the water heater that was supposed to regulate the temperature. - The hot water temperature was difficult to regulate. <p>Interviews on 7/6/2022 and 7/7/2022 with the Support Supervisor revealed:</p> <ul style="list-style-type: none"> - A plumbing company checked the water temperatures every month. - The plumbing company was scheduled to send someone to work on the water heater on 7/11/2022. | V 752 | | |

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| V 752 | Continued From page 5 - Mixers were installed in the hot water lines sometime last year. - The hot water temperature continued to go up despite the mixers. Interview on 7/7/2022 with the Director revealed: - She would ensure the hot water temperature was addressed. | V 752 | | | |