STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL010-077	A. BUILDING: _____ B. WING _____	12/30/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BENYA AFL	800 JOSEPH WILLETTS DRIVE SE WINNABOW, NC 28479

(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	INITIAL COMMENTS An annual survey was completed on December 30, 2022. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F Alternative Family Living. The facility is licensed for 3 and currently has a census of 3 clients. The survey sample consisted of audits of 3 current clients.	V 000		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record review and interview the facility failed to complete Health Care Personnel Registry (HCPR) check prior to hire for 1 of 3 staff (#2). The findings are: Review on 12/29/22 of Staff #2's personnel record revealed: -Hire date: 3/31/22 -Position: Direct Support Associate -The HCPR was accessed on 4/21/22.	V 131		

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V 131	Continued From page 1 Interview on 12/30/22 the Administrator stated: -Staff #2 was brought in to begin trainings and the personnel process on 3/31/22. -Staff #2's official hire date should have been changed from 3/31/22 to the date which corresponded to the completion of trainings and background clearances. -Moving forward, she would review the hire date process with applicable parties.	V 131		
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 interview, 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 12/29/22 at approximately 12:00pm revealed: -The hot water temperature in the kitchen was 120 degrees Fahrenheit. -The hot water temperature in the client bathroom in the hallway was 121 degrees Fahrenheit.	V 752		

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V 752	Continued From page 2 Interview on 12/29/22 the Licensee stated: -She would have the hot water heater/thermostat checked.	V 752		