

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-467 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 09/07/2023 |
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| NAME OF PROVIDER OR SUPPLIER GLEN FOREST HOME | STREET ADDRESS, CITY, STATE, ZIP CODE 5117 GLEN FOREST DRIVE RALEIGH, NC 27612 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 8/7/23. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</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 000 | | |
| V 112 | <p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</p> | V 112 | | |

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

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| V 112 | <p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interview, the facility failed to develop and implement goals and strategies to address the needs of 1 of 3 audited clients (#1). The findings are:</p> <p>Review on 9/5/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admitted 10/28/05 - Diagnoses: Autism, Mild Intellectual Disability, Epilepsy, Dependent Personality Disorder, and Borderline Personality Disorder - Treatment Plan dated 12/8/22 revealed: <ul style="list-style-type: none"> - Goal 1 - Develop and maintain positive social relationships with his housemates - Goal 2 - Manages his emotions in a productive manner - Goal 3 - Maintains a clean and safe living environment - Goal 4 - Increases his self-advocacy to improve his contentment and quality of life - No goals or strategies to address client #1's history of falling or use of his helmet <p>Observation on 9/6/23 approximately 11:35am revealed:</p> <ul style="list-style-type: none"> - Client #1's gait was very unsteady - Staff #1 had to physically help him by holding one side of his arm, go from the dining room table to his room - Halfway to his room, staff #2 had to get a chair for him because he was getting ready to fall | V 112 | | |

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| V 112 | <p>Continued From page 2</p> <p>with staff #1 holding him</p> <p>Observation on 9/6/23 approximately 12:30pm revealed:</p> <ul style="list-style-type: none"> - Client #1 with an unsteady gait, walked out of his room across the living room to the bathroom without a helmet on <p>Review on 9/6/23 of the facility's incident reports for 2023 revealed:</p> <ul style="list-style-type: none"> - 4/27/23 Client #1 fell standing in the doorway of his roommate (no helmet) - 5/15/23 Client #1 fell while reaching for an object in his room (no helmet) - 7/4/23 Client #1 fell in his bedroom trying to put his blanket away (no helmet) - 8/2/23 Client #1 fell trying to get up from dinner (had helmet on) - 8/13/23 Client #1 fell before taking his shower (no helmet) - 9/2/23 Client #1 fell standing up quickly and got dizzy (no helmet) - 9/4/23 Staff #3 was coming out of the staff bathroom and client #1 was laying on the floor in front of the bathroom. She had told him to wait for her in his room as she had to use the bathroom. (no helmet) - 9/5/23 Client #1 he fell the night before in his bedroom trying to turn off his TV (no helmet) <p>Interview on 9/6/23 Staff #1 reported:</p> <ul style="list-style-type: none"> - She had been employed for about 5 years - On 9/4/23 staff #3 told client #1 to stay in his room until she got out of the bathroom - Client #1 didn't listen and went looking for staff #3 and fell by his bedroom door - Client #1 wore a helmet but didn't have it on at that time because he had a history of taking it off - When client #1 fell, staff would call the | V 112 | | |

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| V 112 | <p>Continued From page 3</p> <p>agency nurse to direct them on what to do</p> <ul style="list-style-type: none"> - Overstimulation caused client #1 to have seizures and falls - There was 1 staff overnight which was a sleep overnight position - It was going to change because of client #1 falling - Confirmed there was nothing in client #1's treatment plan about falling or not always being compliant with wearing his helmet <p>Interview on 9/6/23 Staff #2 reported:</p> <ul style="list-style-type: none"> - Been employed since 2/14/23 - She was the residential support staff - Her shift was 9am - 9pm - Client #1 had fallen several times while she was on duty - Client #1 was "very hardheaded and doesn't listen when we tell him to sit down" - Client #1 was not required to have a 1:1 but she believed that they were working on getting him one <p>Interview on 9/7/23 with client #1's brother reported:</p> <ul style="list-style-type: none"> - Client #1 "hit his head for 50 years" - Falling was normal for client #1 - Client #1 needed a little more attention now due to his dizziness - Client #1 got dizzy and fell at least weekly but has increased <p>Interview on 9/7/23 the Qualified Professional reported:</p> <ul style="list-style-type: none"> - She was responsible for completing treatment plans - There was nothing in the treatment plan about client #1's falling or helmet use - She would adjust his treatment plan to include his falls and helmet | V 112 | | |

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| V 118 | <p>Continued From page 5</p> <p>Based on record review, interview and observation, the facility failed to ensure medications were available and that the MARs were kept current affecting 3 of 3 audited clients (#1, #2, #6). The findings are:</p> <p>A. Review on 9/5/23 client #1's record revealed:</p> <ul style="list-style-type: none"> - Admitted on 10/28/05 - Diagnoses: Autism, Mild Intellectual Developmental Disability (IDD), Dependent Personality Disorder, and Borderline Personality Disorder - Signed FL2 dated 1/26/23 revealed: <ul style="list-style-type: none"> - Aripiprazole Tablet (tab), 5 milligrams (mgs) every morning (behaviors) - Oxcarbazepine tab, 600mgs, 1 1/2 tabs twice daily (seizures) - Lidocaine 5% patch for pain was discontinued <p>Review on 9/5/23 client #2's record revealed:</p> <ul style="list-style-type: none"> - Admitted: 7/26/97 - Diagnoses: Autism, Mild IDD, and Bipolar - Physician order dated 9/5/23 revealed: <ul style="list-style-type: none"> - Fluoxetine Capsule (cap), 10mgs, 1 cap daily (antidepressant) <p>Review on 9/5/23 client #6's record revealed:</p> <ul style="list-style-type: none"> - Admitted on 11/17/97 - Diagnosis: High functioning Autism - Signed FL2 dated 1/26/23 revealed: <ul style="list-style-type: none"> - Atorvastatin Tab, 10mg, 1 tab at bedtime (cholesterol) - Doxycycline Tab, 20mg, 2 tabs daily (antibiotic) - Furosemide Tab, 20mg, 1 tab daily (diuretic) - Lisinopril tab, 20-25mg, 1 tab daily (high blood pressure) <p>Observation on 9/5/23 approximately 10:15am</p> | V 118 | | |

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| V 118 | <p>Continued From page 6</p> <p>revealed:</p> <ul style="list-style-type: none"> - staff #1 called the pharmacy to check status of medications that were not in the facility <p>Observation on 9/5/23 approximately 11:00am revealed:</p> <ul style="list-style-type: none"> - client #1, #2 & #6's above listed medications were not present in the facility <p>Interview on 9/7/23 the agency nurse reported:</p> <ul style="list-style-type: none"> - she was a Registered Nurse (RN) - she had been employed for about 4 or 5 years - she visited the facility monthly and sometimes more - last visit was the end of Aug. 2023 and was going there today, 9/7/23 - the pharmacy sent out monthly refills the end of each month but if the order had expired or they needed a hard copy, they would contact the doctor - they were now with a new pharmacy and had left her number for them to contact her if there was something going on with the medications but that hasn't happened yet - she was made aware of the clients not having their medication last Friday, 9/1/23 by staff #1 - staff #1 told her that the pharmacy did not send the medications and that the pharmacy stated that they reached out to the wrong provider - the pharmacy should have contacted her when they first needed an order and she would have made sure that they had it, especially during a holiday weekend - she set up in the agency's system, her preferences, to be contacted for any reason that they didn't send the monthly fill - it had happened before that the order had expired, and they weren't told, but as soon as | V 118 | | |

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| V 118 | <p>Continued From page 7</p> <p>she was made aware, she got it corrected</p> <ul style="list-style-type: none"> - the clients had never been without their medications for this amount of time - this was definitely an isolated incident - she told staff #1 that if anything like this happened again, to call her so she could follow up as well - as long as staff #1 kept her in the loop, this should not happen again <p>B. MARs not current</p> <p>Review on 9/5/23 of client #1's August 2023 & September 2023's MAR revealed:</p> <ul style="list-style-type: none"> - Lidocaine 5% patch for pain was signed off on 10 times in August 2023 - Aripiprazole tab 5mg was blank from 9/1/2023 - 9/3/2023 and not signed off by staff as being administered or circled to reference an explanation on the back of the MAR - Oxcarbazepine tab 600mg was blank from 9/1/2023 - 9/4/2023 and not signed off by staff as being administered or circled to reference an explanation on the back of the MAR <p>Review on 9/5/23 of client #2's September 2023's MAR revealed:</p> <ul style="list-style-type: none"> - Fluoxetine cap 10mg was blank from 9/1/2023 - 9/3/2023 and not signed off by staff as being administered or circled to reference an explanation on the back of the MAR <p>Review on 9/5/23 of client #6's September 2023's MAR revealed:</p> <ul style="list-style-type: none"> - Atorvastatin tab 10mg, Doxycycline tab 20mg, Lisinopril 20-25mg, and Furosemide tab 20mg were blank and not signed off by staff as being administered or circled to reference an explanation on the back of the MAR from 9/1/23 - 9/5/23 | V 118 | | |

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| V 118 | <p>Continued From page 8</p> <p>Interview on 9/5/23 approximately 10:00am Staff #1 reported:</p> <ul style="list-style-type: none"> - staff should not have been signing off on client #1's lidocaine as it was discontinued several months ago - the client's were out of some of their medications - she received a batch of medications on Wednesday, 8/30/23 and thought the rest was coming in the next day since they were on a monthly cycle - she called the pharmacy on Friday, 9/1/23 to see if the medications were coming since they hadn't come in - she had to leave a voice mail message - she called back this morning, 9/5/23 and was told that the pharmacy refaxed the orders to the doctor's this morning - the doctor did not sign off on the refill orders - clients #1, 2, & 6 last took their medications on Friday, 9/1/23 - she did monthly inspections of the medications to make sure nothing expired and that all the medications were in the facility - it was time to do the monthly inspection because she did it at the beginning of the month - the agency nurse came to the facility monthly and would check the medications - she and the agency nurse would need to do a medication training with the staff - never ran out of medications before <p>Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician.</p> | V 118 | | |

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| V 131 | Continued From page 9 | V 131 | | |
| V 131 | <p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to access the Health Care Personnel Registry (HCPR) before hiring 1 of 1 Qualified Professional (QP). The findings are:</p> <p>Review on 8/6/23 the QP's personnel record revealed:</p> <ul style="list-style-type: none"> - Re-hired 5/15/23 - no documentation of an HCPR being accessed upon re-hire <p>Interview on 9/6/23 the Human Resource Manager reported:</p> <ul style="list-style-type: none"> - He was a part of the hiring process - He was responsible for requesting the HCPR checks - The company's policy was to request a new HCPR check if they had not been with the agency for at least 6 months - He did not re-do the QP's re-hire packet because he was not required to do one and the HCPR was not requested | V 131 | | |

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| V 133 | <p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p> <p>(b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history</p> | V 133 | | |

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| V 133 | <p>Continued From page 11</p> <p>record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <p>(1) The level and seriousness of the crime.</p> | V 133 | | |

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| V 133 | <p>Continued From page 12</p> <p>(2) The date of the crime.</p> <p>(3) The age of the person at the time of the conviction.</p> <p>(4) The circumstances surrounding the commission of the crime, if known.</p> <p>(5) The nexus between the criminal conduct of the person and the job duties of the position to be filled.</p> <p>(6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.</p> <p>(7) The subsequent commission by the person of a relevant offense.</p> <p>The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</p> <p>(2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to</p> | V 133 | | |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-467 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 09/07/2023 |
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| NAME OF PROVIDER OR SUPPLIER GLEN FOREST HOME | STREET ADDRESS, CITY, STATE, ZIP CODE 5117 GLEN FOREST DRIVE RALEIGH, NC 27612 |
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| V 133 | Continued From page 13 have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5. (f) Penalty for Furnishing False Information. - Any | V 133 | | |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-467 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 09/07/2023 |
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| NAME OF PROVIDER OR SUPPLIER GLEN FOREST HOME | STREET ADDRESS, CITY, STATE, ZIP CODE 5117 GLEN FOREST DRIVE RALEIGH, NC 27612 |
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| V 133 | <p>Continued From page 14</p> <p>applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to complete a criminal history record check within five business days of making a conditional offer of employment for 1 of 1 Qualified Professional (QP). The findings are:</p> <p>Review on 8/6/23 the QP's personnel record revealed:</p> <ul style="list-style-type: none"> - Re-hired 5/15/23 - no documentation of a criminal history record check being requested | V 133 | | |

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| V 133 | Continued From page 15 Interview on 9/6/23 the Human Resources Manager reported: - He was a part of the hiring process - He was responsible for requesting the criminal history record checks - The company's policy was to request a new criminal history record check if they had not been with the agency for at least 6 months - He did not re-do the QP's re-hire packet because he was not required to do one and the criminal history record check was not requested | V 133 | | |
| 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 governing body failed to assure that the hot water measured between 100 and 116 degrees Fahrenheit in areas accessible to clients. The findings are: Observation on 9/5/23 approximately 12:45pm revealed: - The water temperature in the kitchen sink was 122 degrees Fahrenheit. - The water temperature in bathroom #1 was 126 degrees Fahrenheit. | V 752 | | |

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| V 752 | <p>Continued From page 16</p> <ul style="list-style-type: none"> - The water temperature in bathroom #2 was 124 degrees Fahrenheit. <p>Interview on 9/5/23 Staff #1 reported:</p> <ul style="list-style-type: none"> - She was not aware that the water temperatures were too high. - She would call maintenance to come out to adjust the water temperature. - All clients were able to regulate their own water. - No one had complained that the water was too hot. <p>Observation on 9/5/23 approximately 1:15pm revealed:</p> <ul style="list-style-type: none"> - Staff #1 called maintenance - Maintenance stated that he was at another site and would come directly to the facility after he was finished to adjust the water temperature | V 752 | | |