

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL036-287	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 10/12/2023
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NAME OF PROVIDER OR SUPPLIER MIRACLE HOUSES - TWIN AVENUE	STREET ADDRESS, CITY, STATE, ZIP CODE 2004 TWIN AVENUE GASTONIA, NC 28052
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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 10-12-23. The complaints were unsubstantiated (Intake # NC00207824 and NC00207655). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure For Children or Adolescents.</p> <p>This facility is licensed for 4 and currently has a census of 3. The survey sample consisted of audits of 2 current clients and 1 former client.</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 interview and observation the facility was not maintained in a safe and attractive manner. The findings are:</p> <p>Observation on 9-27-23 at approximately 2:30pm revealed:</p> <ul style="list-style-type: none"> -Approximately 2 to 3 foot area of vinyl flooring around the dining table that had 10-15 small torn areas. -The vinyl flooring leading from the living room area into the kitchen was missing a 5-6 inch long and approximately 3 inch wide piece of the vinyl. <p>Interview on 9-27-23 with the Qualified</p>	V 736		

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> <p>Professional revealed: -He's (the owner) done a lot of work in the house in the last few months. It's coming together."</p> <p>Interview on 10-12-23 with the Executive Director revealed: -She thought the flooring had been fixed. -"I thought we had made all of those repairs. Construction (Division of Health Service Regulation) came right after you (a previous survey) and we worked off the lists construction gave us." -"He (owner) fixed the floor in front of the refrigerator, we must have missed that area."</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		