

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL077-087</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>12/14/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>CREATIVE HELPING HANDS, LLC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>478 GREENLAKE ROAD ROCKINGHAM, NC 28379</b>		
(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 and follow-up survey was completed on December 14, 2023. Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.  This facility is licensed for 4 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.	V 000	In addition to taking into account the general safety of the present clients placed at the facility, the QP and clinical director will continue to interview referred clients in order to accept them into the proper level of care in accordance with the requirements of the level III criteria.	
V 114	27G .0207 Emergency Plans and Supplies  10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use.  This Rule is not met as evidenced by: Based on record review and interviews the facility failed to ensure fire and disaster drills were done quarterly on each shift. The findings are:  Review on 12/14/23 of the facility's fire drill log	V 114	Every quarter, the QP will assume full responsibility for making sure that both shifts' fire and disaster exercises are completed. To make sure the drills are carried out appropriately, the clinical director will evaluate the logs for the fire and disaster drills on the 15th of each month for the quarterly period.  <b>RECEIVED</b> <b>DEC 29 2023</b> <b>DHSR-MH Licensure Sect</b>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Brenda Pumas* TITLE CEO/QP

(X6) DATE  
**12-22-23**

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V 114	<p>Continued From page 1</p> <p>from December 2022- December 2023 revealed: -There were no fire drills conducted on 2nd shift for the 2nd quarter (April, May, June) of 2023. -There were no fire drills conducted on 1st shift for the 3rd quarter (July, August, September) of 2023.</p> <p>Review on 12/14/23 of the facility's disaster drills log from December 2022-December 2023 revealed: -There were no disaster drills conducted on 2nd shift for the 2nd quarter (April, May, June) of 2023. -There were no disaster drills conducted on 1st shift for the 3rd quarter (July, August, September) of 2023.</p> <p>Interview on 12/14/23 with client #1 revealed: -Fire and disaster drills had been done at the facility. -She was unsure when the last fire and disaster drills were conducted. -She was able to describe what to do in case of a fire as well as tornado.</p> <p>Interviews on 12/14/23 with clients #2 and #3 revealed: -They had not experienced any fire or disaster drills while they have been at the facility.</p> <p>Interview on 12/11/23 with the Owner revealed: -Facility operated under two separate shifts. -First shift was from 8:00 am to 8:00 pm. Second shift was from 8:00 pm to 8:00 am. -She thought only one shift had to be conducted per quarter and they needed to alternate them. -She confirmed staff failed to conduct fire and disaster drills quarterly on each shift.</p>	V 114	<p>Every quarterly period the QP will assume responsibility to ensure both shifts are completed with the clinical director reviewing the logs on the 15<sup>th</sup> of every month.</p>	

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V 752	Continued From page 2	V 752		
V 752	<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> <p>This Rule is not met as evidenced by: Based on observation and interviews the facility's water temperature was not maintained between 100-116 degrees Fahrenheit. The findings are:</p> <p>Observation on 12/14/23 of the facility at approximately 1:05 pm revealed :</p> <p>-Kitchen - The kitchen sink water temperature was 130 degrees Fahrenheit.</p> <p>-Bathroom - The sink water temperature was 130 degrees Fahrenheit. The shower/tub water temperature was 130 degrees Fahrenheit.</p> <p>Interview on 12/14/23 with clients #1, #2 and #3 revealed:</p> <p>-They have never had an issue with the temperature of the water.</p> <p>-They were able to regulate their own water temperature.</p> <p>Interview on 12/14/23 with staff #4 revealed:</p> <p>-She worked during the day.</p> <p>-Facility had to change the water heater recently.</p> <p>-She was not aware the temperature of the water was "too high."</p> <p>-She did not know the water temperature needed</p>	V 752	<p>The water heater's farenheit as of December 14, 2023 is 116. QP completed two additional checks on December 16 and 20th. The reading remained 116. CHH staff members will regularly check the temperature of the water. Every three months or more often as needed, a licensed professional will inspect the unit.</p>	

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V 752	<p>Continued From page 3</p> <p>to be between 100-116 degrees Fahrenheit.</p> <p>Interview on 12/14/23 with the Owner/Qualified Professional revealed:</p> <ul style="list-style-type: none"> <li>-Facility changed the water heater last week after it stopped heating water.</li> <li>-She was not aware the water temperature was not adjusted to the right temperature by the person who installed the water heater.</li> <li>-Facility staff did not complete temperature checks on the water.</li> <li>-She was not aware the temperature needed to be between 100-116 degrees Fahrenheit.</li> <li>-She would contact a person to come to the facility to adjust the water heater.</li> </ul> <p>Review on 12/14/23 of Plan of Protection written by the Owner/Qualified Professional dated 12/14/23 revealed:</p> <ul style="list-style-type: none"> <li>-"What immediate action will the facility take to ensure the safety of the consumers in your care?:</li> <li>-Creative Helping Hands (CHH) will contact the installer to turn the hot water heater down. CHH will use a thermometer to ensure the water temperature is not less than 100 or over 116 degrees. The staff will make sure the temperature level is low before the technician leaves in the appropriate range.</li> <li>-Describe your plans to make sure the above happens:</li> </ul> <p>The Qualified Professional (Owner/Qualified Professional) will make contact today (12/14/23,) to have someone come out to turn the water temperature down. If the initial installer is not available, she will reach out to the next available hot water heater technician or plumber."</p> <p>The facility served clients whose ages ranged from 14-15 years old and whose diagnoses included Generalized Anxiety Disorder,</p>	V 752	<p>CHH staff will complete frequent water temperature checks, to ensure temperature is in the range of 100-116.</p> <p>A licensed professional will inspect the unit every three months.</p>	

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V 752	Continued From page 4  Oppositional Defiant Disorder, Post Traumatic Stress Disorder, Disruptive Mood Dysregulation Disorder, Conduct Disorder, Childhood onset type, Attention Deficit Hyperactivity Disorder, Combined Type. Observation on 12/14/23 revealed the water temperature in the kitchen and the bathroom was 130 degrees Fahrenheit. The water heater had been changed the previous week and the water temperature had not been adjusted to be within 100-116 degrees Fahrenheit. Water temperature checks had not been conducted and facility staff did not know what the temperature on the water was supposed to be. This deficiency constitutes a Type A2 rule violation for substantial risk of serious harm and must be corrected within 23 days. An administrative penalty of \$500.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 752	CHH staff will complete regular checks at least three times per week to ensure temperature remains in the range of 100-116.  A licensed professional will inspect the unit every three months to avoid any malfunctioning	