

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL054-126	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/18/2024
--	---	---	---

NAME OF PROVIDER OR SUPPLIER OAKWOOD FACILITY	STREET ADDRESS, CITY, STATE, ZIP CODE 2002 D & E SHACKLEFORD ROAD KINSTON, NC 28504
---	---

(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 complaint and follow up survey was completed on January 18, 2024. The complaint was unsubstantiated (NC00211787). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.</p> <p>This facility is licensed for 12 and currently has a census of 12. 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</p> <p>(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 clean, attractive and orderly manner. The findings are:</p> <p>Observations on 1/17/24 from 11:11am -11:30am of the facility revealed:</p> <ul style="list-style-type: none"> -Bedroom D4 had a brown splatter on the wall above the door alarm. -Bathroom K8 had discolored caulking around the tub and an approximately 1 inch white plastered aread behind the door. -Bedroom D2 had a hole in the wall behind the door knob that was about 1 inch in size and paint was peeling from the wall above the alarm. -Bathroom E had a shower tile missing under the 	V 736	<p style="text-align: center;">RECEIVED FEB 13 2024 DHSR-MH Licensure Sect</p>	

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Kimberly R. Manning, RA</i>	TITLE <i>Program Director</i>	(X6) DATE <i>02/05/24</i>
---	----------------------------------	------------------------------

Appendix 1-B: Plan of Correction Form

Plan of Correction

Please complete all requested information and email completed Plan of Correction form to:

Plans.Of.Correction@dhhs.nc.gov

Provider Name:	Oakwood Facility	Phone:	252-233-0491 ext. 1201
Provider Contact	Kimberly Manning, RN	Fax:	252-233-0495
Person for follow-up:	Director of PRTF Services	Email:	kmanning@novanc.org
Survey completed:	1.18.24		
Intake Number:	NC00211787		
Address:	2000-D/E Shackleford Road, Kinston, NC 28504	Provider #	MHL 054-126

Finding	Corrective Action Steps	Responsible Party	Timeline
V 736 27G .0303 (C) Facility Grounds and Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS	Maintenance Repair & Housekeeping Requisitions will be completed to correct the following findings: -Bedroom D4 had a brown splatter on the wall above the door alarm. -Bathroom K8 had discolored caulking around the tub and an approximately 1-inch white plastered area behind the door. -Bedroom D2 had a hole in the wall behind the door knob that was about 1 inch in size and paint was peeling from the wall above the alarm. -Bathroom E had a shower tile missing under the tub faucet. The grout in the shower was discolored brown. -Bedroom E4 had an open hole above the closet in the ceiling where the sprinkler head missing. Facility inspections will continue to occur on a weekly basis by the maintenance staff and the Facility Support Coordinator. Repair needs will be expeditiously responded to, based on a hierarchy of need to ensure the a safe, clean, attractive and well-kept facility / grounds.	Program Director/ Maintenance Manager / Facility Services Coordinator	Implementation Date: 1/18/24
			Projected Completion Date: 2/14/24