


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-648	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 10/11/2024
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NAME OF PROVIDER OR SUPPLIER TURN AROUND	STREET ADDRESS, CITY, STATE, ZIP CODE 9709 BATTEN COURT MINT HILL, NC 28227
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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>A follow up survey was completed on October 11, 2024. 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 has a current census 3. The survey sample consisted of audits of 1 current client.</p>	{V 000}	<p><i>Please see attached</i></p> 	
{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 observation, record review and interviews the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Review on 10/8/2024 of Division of Health Service Regulation Construction survey dated 4/30/24 revealed:</p> <ul style="list-style-type: none"> -A safety citation that included "smoke detectors by the front door and the staff office were not working as intended." -Facility and grounds maintenance citations for "Multiple holes in the wall and unpainted patched walls throughout the facility. -Multiple dressers are missing knobs. -Hallway near bedrooms was missing a globe on the light fixture. 	{V 736}		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM


6899

E9FQ12


11/20/2024

If continuation sheet 1 of 5

Division of Health Service Regulation

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{V 736}	<p>Continued From page 1</p> <ul style="list-style-type: none"> -Smoke detector in bedroom #2 was not properly secured to ceiling. -Living room had an extension cord. -The exterior light on the left side of the facility was missing a globe." <p>Observation on 10/8/24 from 12:56 pm to 1:35pm revealed:</p> <ul style="list-style-type: none"> -The exterior light on the left side of the facility was missing a globe. -The light fixture was missing a globe to cover the light bulb in the hallway near the bedrooms. - The smoke detector in the area of the front door and staff office was chirping during the entire survey. -The smoke detector in Client #3's bedroom was hanging loose by approximately 1 inch between the smoke detector and ceiling. -Two white extension cords approximately three feet long. Both exposed and plugged into the outlet. One extended across the living room floor connecting to a lamp with the bulb exposed and no shade. -A brown extension cord approximately 3 feet long was plugged into the kitchen wall and extended across the living room floor connected to the television. -There was a palm sized hole in the wall covered with duct tape in Client #3's bedroom near the foot of the bed. -There was a palm sized hole in the wall on the right side of the entrance to the living room. -The towel rack was missing the bar in Client #1 and Client #2's shared bathroom. -The floor air vent cover was lifting from the floor on the left side in Client #1 and Client #2's shared bathroom. -The vanity in Client #1 and Client #2's shared bathroom was unevenly painted, missing 2 knobs, and a piece of wood. 	{V 736}	<p>please see attached</p> 	

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{V 736}	<p>Continued From page 2</p> <ul style="list-style-type: none"> -There was a 10 inch beige spot on the wall that was not painted white like the rest of the wall at the entrance to the living room. -1 tile missing in 3 separate places on the kitchen floor. <p>Interview on 9/30/24 with Client #2 revealed:</p> <ul style="list-style-type: none"> -The Licensee/Qualified Professional (QP)/Executive Director (ED) had been making repairs around the facility. -"It's (facility) getting better, there's just a few things to fix." -She had not noticed the smoke detector chirping. <p>Attempted Interview on 9/30/24 and 10/8/24 with Client #3 revealed:</p> <ul style="list-style-type: none"> -She verbalized random sentences that were unrelated to questions asked. <p>Interview on 9/30/24 with Staff #1 revealed:</p> <ul style="list-style-type: none"> -Been employed at the facility for 2 weeks. -"You'll have to talk to [Licensee/QP/ED] about the smoke detector and repairs." <p>Interview on 10/8/24 with the Licensee/QP/ED revealed:</p> <ul style="list-style-type: none"> -All of the repairs had been completed and there was "nothing else to do." - "I've done everything" (when asked about the smoke detector chirping). -"You all (North Carolina Division of Health Service Regulation) are just nitpicking now, I've done everything I was supposed to do." -He had been "working hard" to make repairs to the facility. -"I don't agree that there are still repairs to be done." -"I'm not putting knobs on the vanity in the girl's room (Client #1 and Client #2). They like it the 	{V 736}	<p>see attached</p> 		

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE


TURN AROUND

9709 BATTEN COURT

MINT HILL, NC 28227

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{V 736}	<p>Continued From page 3</p> <p>way it is."</p> <p>Review on 10/10/24 of the Plan of Protection dated 10/9/24 and signed by the Executive Director revealed:</p> <p>- "What immediate action will the facility take to ensure the safety of the consumers in your care? New Place, Inc. (Licensee) will have an electrician to assess the facility electrical sockets and get them working to minimize and eliminate the use of extension cords. New Place, Inc. will determine what is causing the paint to smear on the wall right of the exit. New Place, Inc. will replace to wall hole plate to replace the cracked one. New Place, Inc. will fully repair or replace individual broken tiles throughout the foyer and kitchen. New Place Inc. will complete painting of sink cabinets in bathroom 2 (Client #1 and #2's shared bathroom) and apply knobs where, required any holes in any bedrooms will be patched, sanded and painted. Each consumer (client) bedroom will be supplied with ample storage to include operable dressers and /or night stands to prevent cluttering of closet space. All light fixture globes shall be installed.</p> <p>Describe your plans to make sure the above happens. New Place, Inc. has currently scheduled for various separate handyman maintenance companies and two separate electricians to come to the facility to assess repairs and provide an estimate to complete the required repairs for the facility to meet NC DSHR (North Carolina Division of Health Service Regulation) standards. The scheduled estimates will occur 10/10/24 at 12 noon and 3pm and on 10/11/24 at 8:30 am and 12 noon. Once the estimates are received New Place, Inc. will have the work done and completed no later than 10/15/24. "</p>	{V 736}	<p>please see attached</p> 	

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{V 736}	Continued From page 4 This deficiency was cited 7 times on 3/22/22, 3/13/23, 8/8/23, 11/29/23, 2/22/24, 4/22/24, and 7/11/24. This facility served clients with diagnoses of Moderate Intellectual Developmental Disability, Post Traumatic Stress Disorder, and Oppositional Defiance Disorder. The facility has been cited multiple times for issues with the building and grounds without demonstrating timely or complete resolution of issues identified. In addition to the 7 DHSR Mental Health Licensure and Certification section surveys with citations within the past 36 months, the DHSR Construction section had also identified issues during their 4/30/24 survey that have not yet been fully resolved. This included, but was not limited to a smoke detector chirping during the entire survey, another smoke detector hanging loose from the ceiling, and extension cords extending across a doorway and in the walkways of floors. Due to the chronic failure to repair and maintain the facility, this deficiency constitutes a Continuing Type B rule violation which is detrimental to the health, safety, and welfare of clients.	{V 736}	<p>please see attached</p> 		

New Place, Inc.
Plan of Correction
Facility Turnaround MHL-060-648

V736 27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS:

A safety citation that included:

"Smoke detectors by the front door and the staff office were not working as intended."

-Facility and grounds maintenance citations for "Multiple holes in the wall and unpainted patched walls throughout the facility.

-Multiple dressers are missing knobs. -Hallway near bedrooms was missing a globe on the light fixture

-Smoke detector in bedroom #2 was not properly secured to ceiling.

-Living room had an extension cord. -The exterior light on the left side of the facility was missing a globe.

-The exterior light on the left side of the facility was missing a globe.

-The light fixture was missing a globe to cover the light bulb in the hallway near the bedrooms.

- The smoke detector in the area of the front door and staff office was chirping during the entire survey.

-The smoke detector in Client #3's bedroom was hanging loose by approximately 1 inch between the smoke detector and ceiling.

-Two white extension cords approximately three feet long. Both exposed and plugged into the outlet. One extended across the living room floor connecting to a lamp with the bulb exposed and no shade.

-A brown extension cord approximately 3 feet long was plugged into the kitchen wall and extended across the living room floor connected to the television.

-There was a palm sized hole in the wall covered with duct tape in Client #3's bedroom near the foot of the bed.

-There was a palm sized hole in the wall on the right side of the entrance to the living room.

-The towel rack was missing the bar in Client #1 and Client #2's shared bathroom.

-The floor air vent cover was lifting from the floor on the left side in Client #1 and Client #2's shared bathroom.

-The vanity in Client #1 and Client #2's shared bathroom was unevenly painted, missing 2 knobs, and a piece of wood.

There was a 10-inch beige spot on the wall that was not painted white like the rest of the wall at the entrance to the living room.

-1 tile missing in 3 separate places on the kitchen floor

Effective October 16, 2024 the following repairs have been made:

- All smoke detectors throughout the home have been replaced with new smoke detectors to be hardwired with battery back-up.
- Any holes throughout the home have been patched and painted,
- All old dressers were replaced with new or used ones to have knobs on all dressers
- The light fixture in hallway near bedrooms have been replaced to include a globe
- Smoke detector in bedroom #2 has been secured to the ceiling
- All electrical outlets have been repaired to eliminate the use of any extension cord and only surge protectors are used throughout the home
- The exterior light on the left side of house has been replaced to include a globe
- Each room has been provided new lamps to include shades on the lamps
- Towel racks have been provided for each bathroom
- All floor air vents have been replaced with new ones to include the air vent cover in Client #1 and Client #2 bathroom
- The vanity in Client #1 and Client #2 has been painted and knobs been replaced to include wood strip being added to replace missing wood
- The 10-inch beige spot on the wall has been cut out, replaced, plastered, sanded, and painted
- The kitchen floor has been replaced with laminate flooring

All damages done at the facility inside or out will be reported to the Executive Director before the end of staff's shift. Also, Executive Director [REDACTED] will be present at the facility a minimum of 4 days per week. Any noticed property damage by [REDACTED] or reported damage by shift staff will be assessed for repairs within 24-hours' notice of the damage. Once the property damaged has been assessed ED [REDACTED] will make a determination that if the repairs can be made in house or will a contractor be needed. At any rate the request for repair will be made and repair will be done within 48 hours after the assessment of damage. The monitoring of this will be ongoing with completion of facility survey being done at minimum of one time per week.