

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601513	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/01/2025
NAME OF PROVIDER OR SUPPLIER BRIGHT TOUCH HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 9128 TOUCHSTONE LANE CHARLOTTE, NC 28227		
(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 A annual and follow up survey was completed on April 1, 2025. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600B Supervised Living for Minors with Developmental Disability. This facility is licensed for 3 and has a current census of 1. The survey sample consisted of an audit of 1 current client.	V 000		
V 119	27G .0209 (D) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30	V 119		

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

TITLE

(X6) DATE

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V 119	<p>Continued From page 1</p> <p>calendar days after the date of discharge.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to dispose of expired medications which belonged to a former client. The findings are:</p> <p>Observation on 4/1/25 at 1:49 pm of medications which were contained in a paper bag revealed: -The expired medications which had medication remaining in each medication packet were: -Oseltamivir Phosphate 75 milligrams (mg) with an expiration date of 12/12/24. -Quetiapine Fumarate 100 mg tab with an expiration date of 12/12/24. -Cetirizine Hydrochloride (HCL) 10 mg tab with an expiration date of 11/4/24. -Citalopram Hydrobromide (HBR) tab with an expiration date of 11/14/24. -Guanfacine 1 mg tab with an expiration date of 11/14/24. -Mirtazapine 15 mg with an expiration date of 11/14/24.</p> <p>Interview on 4/1/25 with Quality Assurance revealed: -The name on the expired medications was a former client. -The former client had an admission date of 11/17/23 and discharge date of 12/17/23.</p> <p>Interview on 4/1/25 with the Licensee revealed: -The expired medications were in the locked medication closet and the medications were</p>	V 119		

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V 119	Continued From page 2 secured. -His medication policy was to dispose of expired controlled medications by returning the medication to the pharmacy. Other medications could be disposed of by flushing the medication in the toilet. -Disposed medications were to be "logged" (documented). -He had Staff #1 return the expired medications to the pharmacy on 4/1/25 for disposal.	V 119		
V 736	27G .0303(c) Facility and Grounds Maintenance 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. This Rule is not met as evidenced by: Observation on 4/1/25 between 1:18 pm-1:49 pm of the facility revealed: -2 rubberized front porch mats laying in mulch and under hedges near the front door. -The exterior front door had: -Multiple areas of peeling paint of variable sizes from the top door panels of the door to the bottom of the door. -At least 6-7 rusted places of variable sizes from the top of the 2 lower door panels to below these same 2 bottom panels. -A semi-circular hole around the left side of the top door lock. -The exterior light fixture located on the right side of the front door was hanging down. -A black-colored screen was loose on the back basement window underneath the deck. -Client #1's bathroom sink vanity had cracks	V 736		

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V 736	Continued From page 3 around the back and left side of the vanity cabinet. -There were at least 2 small cracks around the light switch on the dining area wall to the left side of the back door. Interview on 4/1/25 with Client #1 revealed: -" I don't know what happened over there (wall cracks at dining room light switch) ...trying to move the chair and hit that thing I guess." Interview on 4/1/25 with the Licensee revealed: -He would address the conditions of the exterior front door. -He would have to call someone to repair the outside light fixture. -He was not aware the basement screen was loose; he would take care of having the screen reattached. -The cracks around Client #1's bathroom sink vanity probably needed caulking. He would see this area was repaired. -He was not aware of the cracks around the dining wall light switch. He would address this situation. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 736		
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	V 752		

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V 752	<p>Continued From page 4</p> <p>water shall be maintained between 100-116 degrees Fahrenheit.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to maintain the water temperature between 100-116 degrees Fahrenheit. The findings are:</p> <p>Observation on 4/1/25 between 1:18 pm-1:49 pm of the facility revealed: -In Client #1's bathroom, the water temperatures of his sink and bathtub were 92 degrees Fahrenheit. -The kitchen sink water temperature was 91 degrees Fahrenheit. -The water temperature of the bathroom sink connected to a vacant client bedroom was 92 degrees Fahrenheit.</p> <p>Interview on 4/1/25 with Client #1 revealed: "I want my water to get hot. When I take a shower, it gets cold ...every day it (water) is cold."</p> <p>Interview on 4/1/25 with the Licensee revealed: -The last time he checked the water temperature was one day last week and the temperature was 103 degrees. -He would make sure the water temperature was turned up as soon as possible and the temperature maintained within the required range. -Client #1 had not said anything to him about the water temperature.</p>	V 752		