PRINTED: 06/13/2022 FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
		A. BUILDING:		R		
HAL026067		B. WING		06/01/2022		
NAME OF PE	ROVIDER OR SUPPLIER	STREET ADD	DRESS, CITY, STA	TE, ZIP CODE		
ARC OF H	OPE MILLS	4124 PECA	AN DRIVE LS, NC 28348			
(X4) ID	SUMMARY ST	ATEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CORRECTION	1	(X5)
PREFIX TAG	•	Y MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPR DEFICIENCY)		COMPLETE DATE
{D 000}	Initial Comments		{D 000}			
	The Adult Care Licensure Section conducted a follow up survey on June 1, 2022.					
{D 077}	10A NCAC 13F .0306 Furnishings	6(a)(4) Housekeeping And	{D 077}			
	10A NCAC 13F .0306 Housekeeping And Furnishings (a) Adult care homes shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more; This Rule shall apply to new and existing facilities.					
		ns, interviews, and record liled to maintain a North Invironmental Health				
	The findings are:					
	Environmental Health 11/02/21 revealed: -There was a score of -There was document around the women's of stained floors in reside and community restriction.	tation of cracked floors/tile community toilet, dirty, ents' room, laundry room				

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

(X6) DATE TITLE

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STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA		(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY		
AND PLAN OF CORRECTION IDENTIFICATION NUMBER		IDENTIFICATION NUMBER:	A. BUILDING:		COMPLETED	
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		P WING		R		
		HAL026067	B. WING		06/01/2022	
NAME OF P	ROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, STA	TE. ZIP CODE		
ARC OF H	IOPE MILLS		AN DRIVE			
		HOPE MI	LLS, NC 28348			
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				,		
{D 077}	Continued From page	e 1	{D 077}			
	The return vente and	I filtere in both ballways were				
	observed soiled.	I filters in both hallways were				
		growth in regidents!				
	-There was microbial					
		n beam in the facility and on				
	food placed in a plast					
		ped pan not labeled or dated				
	in a resident's room.					
		ıre in a resident's room was				
	below 100 degrees Fa					
	•	ebs and live spiders and				
	spider eggs observed in window seals, window					
	screens and exit door					
	-There were residents' personal items, blankets,					
	socks and adult diapers stored on the floor.					
	-The medication pill crusher was observed soiled					
	with medication reside					
		sheets and mattresses				
	which were stained w	ith bodily fluids and or food				
	debris.					
	-There was soiled line	en stored directly on the				
	floor.					
	-There were residents' beverages stored directly					
	on the floor.					
	Observations of room	n #11 on 06/01/22 at 9:48am				
	revealed:					
	-There was a section	of the baseboard missing				
	that measured approx	ximately two inches in width.				
	-The missing portion	of the baseboard was laying				
	on the floor.					
	Observations of the b	athroom between rooms				
	#10 and #11 on 06/01	1/22 at 9:50am revealed:				
	-The floor tiles behind	the commode were				
	discolored with a brow	wnish color stain.				
	-The right lower corne	er of the sink cabinet, where				
	_	joined, was broken and				
	deteriorating.					
		of the baseboard missing at				

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the corner of the wall next to the shower.

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED	
			71. 201221110			
HAL026067		B. WING		R 06/01/2022		
NAME OF F	ROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, STA	TE, ZIP CODE		
		4124 PEC	AN DRIVE			
ARC OF I	HOPE MILLS	HOPE MIL	LS, NC 28348			
(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 CROSS-REFERENCED TO THE APPROPE DEFICIENCY)	BE	(X5) COMPLETE DATE
{D 077}	Continued From page 2		{D 077}			
	and #9 on 06/01/22 a -The towel bar on the was brokenThe floor tile close to -The baseboard was -The floor tiles around a brownish colorThere were cracked from room #9 leading Observations of room revealed: -The floor vent next to bentA floor tile near the of Telephone interview of Health Department In 8:55am revealed: -The last inspection s which was from an er inspection conducted -The facility managem facility was ready for -The facility managem facility was ready for -The facility had not re- inspection visitThe Environmental I- perform a "courtesy of one had requested a -There was no specifi request for a re- inspection a -Once a request for a made, the environme	wall next to the commode the shower was cracked. separating from the wall. If the commode were stained floor tiles in the doorway into the bathroom. If #8 on 06/01/22 at 10:15am If the bed was rusted and floor was cracked. With the local Environmental spector on 06/01/22 at core for the facility was 82.5 Invironmental health If on 11/02/21. Inent was responsible for If or re-inspection visit because ent would know when the If a re-inspection visit. If equested a follow up If the local the courtes of the cour				

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY COMPLETED			
AND PLAN	OF CORRECTION	CORRECTION IDENTIFICATION NUMBER: A. BUILDING:			CONFLETED			
		HAL026067	B. WING		R 06/01/2022			
NAME OF P	NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE							
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		HOPE MIL	LS, NC 28348					
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{D 077}	Continued From page	e 3	{D 077}					
{D 077}	Interview with the Execute Care Coordinator (EE 9:15am revealed: -He was expecting the Inspector to come bare-inspection because inspection scoreTo prepare for the rethrough the last inspection gother facility staff conticleaning of the facilityHe had not tried to contend the last inspection with the Adrian 10:54am revealed: -She saw the Environ 03/07/22, in a restuar was ready for a re-insection was ready for a re-insection for the environmental health today (06/01/22) and inspection would be sinspection could be directly with the Adrian 1:45pm revealed she	ecutive Director/Resident D/RCC) on 06/01/22 at e Environmental Health ck to the facility for a e the facility had a "low" visit, the facility staff went ection report and corrected cinued to perform daily //. ontact the Environmental equest a re-inspection visit. ministrator on 06/01/22 at mental Health Inspector on rant, and told her the facility espection. onmental Health Inspector am and left a message as ready for the re-inspection. Health Inspector called her informed her that an echeduled as soon as the	{D 077}					
	her in March 2022 be	cause she thought the Inspector would be coming						
Interview with the Housekeeper on 06/01/22 at 12:08pm revealed: -She was the only housekeeper at the facilityShe sometimes worked five days during the								

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DIVISION	n nealth Service Negu	ialion			_	
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		B. WING		R		
		HAL026067	D. WING	· · · · · · · · · · · · · · · · · · ·	06/01/	2022
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IAG	112002110111 0111		IAG	DEFICIENCY)		
{D 077}	Continued From page	e 4	{D 077}			
	week.					
	-She cleaned residen	t rooms overv day				
	every other day.	cleaning of resident rooms				
		ned rooms, she pulled out				
	•	•				
	furniture, cleaned win	ept and mopped behind the				
	-	ne resident hall each day.				
		stained from wax build-up.				
	-The floor stains woul	·				
		be stripped and waxed				
	again.					
		ormed the waxing and				
	buffing of the floors.					
	-	floor tiles were in the facility				
	since she began emp	loyment in March 2022.				
	Interview with the Adr	ministrator on 06/01/22 at				
	1:47pm revealed:					
	-The brown colored s	tained areas on the floors				
	throughout the facility	were from floor wax and				
	could not be cleaned.					
	-The floors needed to	be stripped and waxed to				
	remove the brown co	lored stained areas on the				
	floors.					
		/RCC on 06/01/22 at 1:50pm				
	revealed:					
	-The baseboards wer					
	maintenance staff, an					
	currently have a main					
		e Owners to respond about				
	replacing the cracked					
	-He had been at the f	acility since November				
	2021, and there had r	not been any floor tiles				
		since November 2021.				
	Interview with the Adr	ministrator on 06/01/22 at				
	2:20pm revealed she	was responsible for				

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ensuring the environmental health inspection was

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{D 077}		e 5 nvironment of the facility was	{D 077}				

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