STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL051036	A. BUILDING: **01** B. WING _____	**06/22/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKVIEW COMMONS	**565 BOYETTE ROAD** **FOUR OAKS, NC 27524**

(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
C 000	Initial Comments Report of a Biennial Survey by Billy S. Bryant conducted on 06/22/2016. Records indicate this facility was first licensed on 12/12/1988. The facility is currently licensed for 96 Beds with a 40 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1978 (Revision 8) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1987 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observations of the entire facility the walls, ceilings and floors are not clean and in good repair. Findings on 06/22/2016. a. Door frames are gouged and scarred and require touch up painting and repair. b. Facility corridor walls are marred and require	C 164		

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C 164	Continued From page 1 touch-up painting and repair. c. The shared resident bathroom floors are not clean. d. HVAC grilles in the facility are clogged with dust and particulate.	C 164		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation of the resident's shared bathrooms the facility did not have the required furnishings in the bedrooms or adjoining bathrooms for each resident. Finding on 06/22/2016: a. Resident bathrooms are shared by two double occupancy rooms but do not have a separate towel bar for each resident.	C 175		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult	C 189		

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C 189	Continued From page 2 care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation of the facility's fire safety equipment is not being maintained in working order. Fire alarm safety equipment that is not maintained in proper working order could effect occupants of the facility if there was a delay in smoke from fire being detected by a fire alarm device. Finding on 06/22/2016: a. S.C.U. - The fire alarm panel is indicating a "trouble" with the lobby duct smoke detector. 2. Based on observation the facility's fire safety equipment is not being maintained in working order. Fire safety equipment that is not maintained in proper working order could effect occupants of the facility if there was a delay in evacuation if the fail safe manual override for the special locking adjacent to the exit door could not be operated. Findings on 06/22/2016: a. Exit Door Adjacent to Visitor Restroom - The key for the keyed manual override switch for the magnetic door lock did not operate the switch. b. Staff responsible for assisting with evacuation was not aware of the purpose of the keyed manual override switch and did not have keys for the switch. 3. Based on observation the facility's electrical	C 189		

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C 189	Continued From page 3 safety equipment is not being maintained in working order. Electrical safety equipment that is not maintained in proper working order could effect occupants of the facility if there was a delay in evacuation due to failure of emergency lighting. Findings on 06/22/2016: a. 300 Hall - Exit Sign Adjacent to Cross Corridor Doors -The exit sign is not working on house current or battery power. b. Private Dining Room - The exit sign is not working on battery power. 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the facility could be effected if doors do not latch and remain closed as required so as to limit the spread of smoke or fire to the area of origin. Findings on 06/22/2016: a. Library - One leaf of the double doors to the corridor did not latch, the latch mechanism would not operate.. b. Cross Corridor Doors Adjacent to Soiled Linen Room - One leaf of the door would not latch, the latch mechanism would not operate. 5. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner. Penetrations or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Finding on 06/22/2016: a. Laundry - There is a gap around the piping for the water heater where it penetrates the fire	C 189		

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C 189	Continued From page 4 resistant rated ceiling.	C 189		