

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL031006	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED C 06/29/2016
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NAME OF PROVIDER OR SUPPLIER WINDHAM HALL	STREET ADDRESS, CITY, STATE, ZIP CODE 329 COOPER STREET KENANSVILLE, NC 28349
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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
C 000	<p>Initial Comments</p> <p>Report of a Complaint Construction Survey by Ed Miller and Bob Getchell on June 29 2016. A Biennial Construction Survey was performed at the same time.</p> <p>Records indicate this facility was first licensed as a Home for the Aged serving 80 residents on November 1, 1967. Therefore the facility must meet the 1971 and the applicable portions of the 2005 Rules for Licensing of Adult Care Homes, and, the 1967 North Carolina State Building Code Section 407- for Group "D"-Institutional Occupancy.</p> <p>The complaint alleged that renovation activities are creating hazards to the residents.</p> <p>Complaint was substantiated.</p> <p>Deficiencies were noted which require a Plan of Correction.</p>	C 000		
C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, corridors were not free of all equipment and other obstructions. This would affect all residents, staff and visitors by slowing or obstructing egress during an emergency. Findings on June 29, 2016: a. Right Corridor - there was a drawer, a</p>	C 150		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 150	Continued From page 1 clothing item and a drop cloth in this corridor.	C 150		
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 Observation, the facility failed to keep walls, ceilings, floors or floor coverings and furniture clean and in good repair. Findings on June 29, 2016: a. Throughout the Building - the corridor floors had a light coat of dust.	C 164		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to	C 183		

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C 183	Continued From page 2 grow larger. This would affect all residents, staff and visitors by not identifying emergency equipment not in proper working order. Findings on June 29, 2016: a. Throughout the Building - The portable fire extinguisher were sitting on the floor, not mounted as required by NFPA 10.	C 183		