

HOBBS ASSISTED LIVING, INC  
2504 TOWERHILL ROAD  
KINSTON, N.C. 28501

**FAX TRANSMITTAL COVER SHEET**

FAX NUMBER: (252)523-2909

TELEPHONE NUMBER: (252)523-5755 / 252-268-0213

TO: DHSR Construction Section / Ms. S. Faye

FAX PHONE #: (919) 733-6592

FROM: Hobbs Assisted Living 2 / Ms. Hobbs

DATE: 11/16/16

REASON: Fixing Biennial Construction - Plan of Correction for deficiencies cited during survey on 9/28/16.

Please call 252-268-0213 for future contact.

# OF PAGES( INCLUDING THE COVER SHEET) 7 + 3 sheets / Work orders Receipts if needed.  
IF there is trouble with this transmission, or all pages are not received, please call the above number at (252)523-5755.

PRINTED: 10/05/2016  
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL054042</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>09/28/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HOBBS ASSISTED LIVING 2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2504 TOWERHILL ROAD KINSTON, NC 28501</b>
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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
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C 000	Initial Comments  Report by Suzanna Fay  DHSR Construction Section conducted a Biennial Survey on September 28, 2016 from 1:40 PM to 2:55 PM at the above referenced facility. DHSR records indicate the home was first licensed on January 4, 1993 as a Family Care Home for five ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency.) Based on this information we are requiring the home to maintain compliance with the following: the 1992 Family Care Homes Rules T10: 42C, applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 (1992 Revision) North Carolina State Building Code - Section 513.1, Exception 1 - Residential Care Facilities.  At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 174	Building Equipment Maintained Safe, Operating  SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (i) This Rule shall apply to new and existing family care homes.  This Rule is not met as evidenced by: 1. Observations revealed that the electrical outlet box at the bathroom vanity was loose. Have a qualified technician secure the outlet. Provide documentation of the repairs in the form of	C 174	<u>Building Equipment</u> (1) A. Loose electrical outlet box at the bathroom vanity. B. The area around the electrical outlet was secured with sheet rock patch and repair compound. C. The outlet will be checked when safety switches are checked monthly to ensure it is secured and not loose. D. Outlet secure date of completion.	10/15/16

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Suzanna K. Hobbs* TITLE: *Administrator* (X8) DATE: *11/13/16*

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C 174	<p>Continued From page 1</p> <p>receipts or work orders.</p> <p>2. Observations revealed that the cabinet for the bathroom sink had deteriorated along the bottom edges. The finish was soft, worn and crumbling. Have a qualified technician replace the sink cabinet. Provide documentation of the repairs in the form of photos, receipts or work orders.</p> <p>3. Observations revealed that the tub faucet was leaking. Have a qualified technician repair the leak. Provide documentation of the repairs in the form of receipts or work orders.</p> <p>4. Observations revealed that the wall to the left of the tub was damaged. The finish was bubbled and rough. Have a qualified technician repair the wall. Provide documentation of the repairs in the form of photos, receipts or work orders.</p> <p>5. Observations revealed that the front window in the first bedroom had a cracked window pane as well as a crack in the storm window. The glass in the right window of the middle bedroom had several large cracks rendering the pane loose. Have a qualified technician replace the damaged glass. Provide documentation of the repairs in the form of receipts or work orders.</p> <p>6. Observations revealed that the left hand closet door in the last bedroom was stuck and could not be opened. Have a qualified technician repair the door so that the Resident can get to his belongings. Provide documentation of the repairs in the form of photos, receipts or work orders.</p>	<p>C 174</p> <p>(2)</p> <p>C174</p> <p>(3)</p> <p>C174</p> <p>(4)</p>	<p><u>Bath room SINK</u></p> <p>A. Purchased and replaced bath room vanity.</p> <p>B. Vanity was replaced on 10/14/16.</p> <p>C. Will maintain by keeping clean and dry.</p> <p>D. Completion date 10/14/16</p> <p><u>Leaking Faucet</u></p> <p>A. The seals inside the faucet were replaced.</p> <p>B. Seals replaced on 10/17/16.</p> <p>C. Leaks secured on 10/17/16</p> <p><u>Damaged Wall to left of Tub</u></p> <p>A. The area was sanded down and sheet rock mud was spread over the area and allowed to dry</p> <p>B. The area was sanded</p>	<p>10/14/16</p> <p>10/17/16</p> <p>10/14/16</p>
C 138	<p>Outside Entrances/Exits-Single Hand Motion</p> <p>T10: 42C</p>	C 138	<p>B. The area was sanded</p>	<p>10/14/16</p>

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C 138	<p>Continued From page 2</p> <p>.2209 OUTSIDE ENTRANCES AND EXITS (d) All exit doors locks must be easily operable, by a single hand motion, from the inside at all times without keys.</p> <p>This Rule is not met as evidenced by: 1. Observations revealed that both of the exit doors had deadbolts and neither had single action hardware. The back door screen door had a thumb latch that was not single action. Have a qualified technician remove the deadbolts and replace the door hardware with single action hardware. Remove or disable the thumb latch. Provide documentation of the repairs in the form of receipts or work orders.</p>	C 138	<p>again on 10/16/16 CITY The area will be painted by 10/30/16 E. Area <del>was</del> spray <del>area</del> will be painted first with Kiltz. 10/30/16.</p> <p>(5) Broken Window Panes in middle bed room and 3rd bed room. A. All broken panes were removed (middle bedroom and 3rd bedroom including storm window pane). B. New panes were cut and purchased at Rays Glass Shop.</p>	11/30/16 10/30/16 ck
C 143	<p>Floors</p> <p>T10: 42C .2211 FLOORS (a) All floors must be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs are not to be used. (c) All floors must be kept in good repair.</p> <p>This Rule is not met as evidenced by: 1. Observations revealed a large area rug in the sitting room. There were carpet stains along the edge of the rug so it appears that the rug was laid down to cover the stains. There was a small 2'x3' rug at the bottom of the stairs in the dining room. Remove the rugs. Clean or replace the stained carpet as required. Provide documentation of</p>	C 143 CITY	<p>C. The Window Panes were all replaced by 10/30/16. D. Window Panes will be checked periodically for breaks or cracks. E. Completion Date — 10/30/16</p> <p>(6) Left hand Closet door or bedroom A. Purchased new door knob for left hand closet</p>	

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C 143	<p>Continued From page 3</p> <p>the repairs in the form of photos, receipts or work orders.</p> <p>2. Observations revealed that the vinyl floor around the bathroom toilet was torn. Have a qualified technician repair or replace the damaged floor. Provide documentation of the repairs in the form of photos, receipts or work orders.</p> <p>3. Observations revealed that a vinyl floor patch in the hall outside of the back bedroom. The edges of the patch are curling posing and tripping hazard. Have a qualified technician repair or replace the flooring in the hallway. Provide documentation of the repairs in the form of photos, receipts or work orders.</p>	<p>C 143</p> <p><u>C138</u></p> <p><u>C143</u></p>	<p><u>C134</u> Continued - left hand closet door. B. Door Knob will be replaced by 11/30/16. C. Replacement date by 11/30/16</p> <p><u>C138</u> Outside Entrance/Exits - Single hand Motion hard-ware replacement. A. Removal of deadbolt locks from front and back doors and removal of thumb latch from back screen door. B. Received an Email from Mr. A. Brinson of type of hardware recommended. Responded to Mr. Brinson on 11/15/16. Hardware purchased on 11/15/16. C. Hardware (single motion emergency exit feature) will be installed by 11/24/16 D. Installation date by 11/24/16</p> <p><u>C143</u> 42C:2211 Floors A. Large Rug in sitting room stains on the rug's edges were from adhesive spray to secure the corners of the rug to the floor. The rug was not laid down to cover any stains. It is a 9'x12' rug suggested by an annual surveyor in 2015.</p>	<p>11/30/16</p> <p>11/20/16 11/24/16</p>

- C143 420 .2211 Floors Continued page 4 of 4
- (8)   
 cont'd
- On 10/11/16, I spoke with Ms. Suzanna Fey concerning the 9'x12" area rug in sitting area of the facility. She said she would be addressing the matter to her supervisor and will get back with me with the outcome.
- B. All Carpets are shampooed every 3 months or when needed for Spot Cleaning. The small rug in dining area will be removed.
- C. All Carpets were shampooed. The sitting room and dining room were shampooed on 11/2/16 and the bed rooms were shampooed on 11/4/16.
- D. The completion date for the area rug is on going. Waiting for the outcome of Ms. Fey meeting with her supervisor.

(9) C143 Floors

- A. Vinyl Flooring around bathroom toilet was torn.
- B. Vinyl Flooring was replaced around the toilet.
- C. Completion date 10/15/16.

(10) 143 Floors

- A. Vinyl Flooring in hallway outside 3rd Bedroom.
- B. Vinyl Flooring was purchase to replace flooring outside 3rd bedroom on 10/11/16.
- C. Flooring was replaced on 10/14/16.
- D. Periodic checks will be made to ensure the safety of the residents from tripping hazards. Date of completion 10/14/16

#4

C174

The wall to the left of tub needs more work.  
Needs another coat of sheet rock mud applied.  
Needs time to dry for sanding, then paint  
needs to be applied. Completion date should  
be by 11/25/16. Will send pictures/photos

158357

**JOB WORK ORDER**

BILL TO: <i>Hobbs Assisted Living</i>		DATE: <i>10/11 - 10/18/16</i>
ADDRESS: <i>2504 Tower Hill Road</i>		START DATE:
CITY, STATE, ZIP: <i>Kinston, N.C. 28501</i>		<input type="radio"/> DAY WORK
PHONE: <i>252-523-5755 - 252-268-0213</i>		<input type="radio"/> CONTRACT
JOB NAME: <i>Mr. G. Leach (252-933-6874) Mr. Lee Keenice <sup>252</sup> 268-6800</i>		<input type="radio"/> EXTRA ADD-ON
LOCATION: <i>Kinston NC 28501</i>	PHONE: <i>see above (Carpenters-Bricklayers)</i>	
CUSTOMER ORDER NO.	ORDER TAKEN BY: <i>U</i>	MECHANIC:
		HELPER:

DESCRIPTION OF WORK	
<i>Outside Entrance/Exit</i>	
<i>1) Front and back door</i>	
<i>Knobs - removal of dead bolt</i>	
<i>locks and thumbnail latch</i>	
<i>on back screen door.</i>	
<i>2) Purchased new door knobs</i>	
<i>and hardware to replace holes</i>	
<i>where deadbolts were.</i>	
<i>3) door knob on left side @ closet door</i>	
<i>in 3rd bedroom - removed.</i>	
	TOTAL MATERIALS: <i>172<sup>00</sup></i>
	TOTAL LABOR: <i>30</i>
	TAX: <i>-</i>
DATE COMPLETED: <i>11/17/16</i>	WORK ORDERED BY: <i>lh</i>
	TOTAL AMOUNT: <i>102<sup>00</sup></i>

NO ONE HOME       TOTAL AMOUNT DUE       BILLING TO BE MAILED

I HEREBY ACKNOWLEDGE THE SATISFACTORY COMPLETION OF WORK DESCRIBED ABOVE.

SIGNATURE: *Lorraine Hobbs 11/17/16*



**JOB WORK ORDER**

158356

**Rediform** 41456

**SIGNATURE:** *[Signature]*

DATE COMPLETED: 10/14/16  
 WORK ORDERED BY: *[Name]*

NO ONE HOME  
 TOTAL AMOUNT DUE  
 BILLING TO BE MAILED

I HEREBY ACKNOWLEDGE THE SATISFACTORY COMPLETION OF WORK DESCRIBED ABOVE.

TOTAL AMOUNT:	\$ 243.00
TAX:	—
TOTAL LABOR:	175.00
TOTAL MATERIALS:	100.00

**DESCRIPTION OF WORK**

Window Panel -  
 removed and replaced window  
 panel in 3rd bedroom (A) and 3rd bed -  
 room (B) window pane & storm window  
 pane. (Removal of pane for brackets & glass  
 in 3rd bedroom. Replaced small pane  
 in 3rd bedroom during storm.

**Customer Information:**  
 CUSTOMER ORDER NO: *[Blank]*  
 LOCATION: *[Blank]*  
 JOB NAME: *[Blank]*  
 PHONE: 852-523-5755  
 CITY/STATE/ZIP: *[Blank]*  
 ADDRESS: *[Blank]*

**Order Information:**  
 ORDER TAKEN BY: *[Blank]*  
 PHONE: 852-933-6574 - 852-686-6800  
 MECHANIC: *[Blank]*  
 HELPER: *[Blank]*

**Job Details:**  
 DATE: 10/14/16  
 START DATE: 10/14/16  
 DAY WORK  
 CONTRACT  
 EXTRA ADD-ON

158353

**JOB WORK ORDER**

BILL TO: <i>Habbs Assisted Living</i>		DATE: <i>10-11-11-18/16</i>
ADDRESS: <i>2504 Tower Hill Rd.</i>		START DATE: <i>10/11/16</i>
CITY, STATE, ZIP: <i>Renton, N.C. 28501</i>		<input checked="" type="radio"/> DAY WORK
PHONE: <i>252-523-5785</i>		<input type="radio"/> CONTRACT
JOB NAME: <i>Mr. Tony Leach (Carpenter) Mr. Lee Keener (Carpenter)</i>		<input type="radio"/> EXTRA ADD-ON
LOCATION: <i>252-933-6874 - 252-268-6800</i>		Mechanics: _____
CUSTOMER ORDER NO. _____	ORDER TAKEN BY: <i>th</i>	HELPER: _____

DESCRIPTION OF WORK	
<i>Bathroom -</i>	
<i>1) repair rug (floors)</i>	<i>7. Vent</i>
<i>2) replace vanity</i>	<i>8. New rug</i>
<i>3) replace tub</i>	
<i>4) leaking faucet</i>	
<i>5) replaced wall insert</i>	
<i>6) repair left side of tub</i>	
<i>Hallway - Floors</i>	
<i>1) repair/replace rug</i>	
<i>near entrance of 3 bedroom</i>	
<i>Window Panes</i>	
<i>1) 2 bedroom - 1 window pane</i>	
<i>2) 3rd bedroom 2 window panes (pane + storm window pane)</i>	
TOTAL MATERIALS:	<i>\$837.00</i>
TOTAL LABOR:	<i>334.00</i>
TAX:	—
TOTAL AMOUNT:	<i>\$1171.00</i>
DATE COMPLETED: <i>11/21/16</i>	WORK ORDERED BY: <i>Lorraine Habbs</i>

NO ONE HOME  
 TOTAL AMOUNT DUE  
 BILLING TO BE MAILED

I HEREBY ACKNOWLEDGE THE SATISFACTORY COMPLETION OF WORK DESCRIBED ABOVE.

SIGNATURE: *Lorraine Habbs* *10/14/16 -*  
*10/18/16*