	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A, BUILDING: 01 B. WING			(X3) DATE SURVEY COMPLETED 05/04/2017	
		HAL021009			05/0		
NAME OF P	ROVIDER OR SUPPLIER			STATE, ZIP CODE			
EDENTO	N HOUSE		ICAL ARTS D N, NC 27932				
(X4) ID SUMMARY STATEMENT OF DEFICIENCIES PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL TAG 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) COMPLE DATE		
C 164 H	Frank Strickland or This facility was lick Home for the Aged Therefore, this facility conformance with the 2005 Rules for Lick Seven or More Bed 2002 Edition of the Code(s), Section 40 Deficiencies have the Correction is required Housekeeping and SECTION .0300 - Floan NCAC 13F .03 FURNISHINGS a) Adult care home 1) have walls, ceiling the coverings kept clean (a) have furniture of the companion of the covering of the shall accilities. This Rule is not meaning the following interior indings on 05/04/2 the following interior eneer damage due a) Room 113	ensed on 06/28/2007 as a (HA) housing sixty beds. lity was surveyed for the applicable portions of the ensing of Adult Care Homes of ds, applicable portions of the North Carolina Building 07-Group I-2. Deen cited and a Plan of ed. Furnishings-Clean, Repaired PHYSICAL PLANT 06 HOUSEKEEPING AND Les shall: Lings, and floors or floor on and in good repair; c unpleasant odors; lean and in good repair; apply to new and existing Let as evidenced by: Letions, this facility has failed to refinishes.	C 164	Responses to the cited not constitute an admis by the facility of the trut alleged or conclusions: Statement of Deficienci Correction is prepared of compliance with State of Edenton House that the interior finishes as resection .0300- PHYSIC NCAC 13F .0306 HOUSE FURNISHINGS The following interior do and repainted (a) Room 113 (b) Room 114 (c) Room 115 (d) Room 206	sion or aggree h of the facts set forth in the es: the plan of solely as a mat e law. It is a po the facility main equired in AL PLANT 10 SEKEEPING A	ment ter olicy ntain	
(0	b) Room 114 b) Room 115 d) Room 206 th Service Regulation			(e) Room 208 (f) Room 210	C	5/23/17	

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STATE FORM

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER-A. BUILDING: 01 COMPLETED HAL021009 B. WING 05/04/2017 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 323 MEDICAL ARTS DRIVE **EDENTON HOUSE** EDENTON, NC 27932 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) C 164 Continued From page 1 C 164 (e) Room 208 (f) Room 210 2-Based on observations, this facility has not maintained in a safe the securement of the corridor handrails. This could affect residents by It is a policy of Edenton House to maintain disrupting grasping support for stability of a in a safe manner the securement of the resident. corridor handrails as required in Rule SECTION .0300 - PHYSICAL PLANT Findings on 05/04/2017; 10A NCAC 13F .0306 HOUSEKEEPING The corridor handrail is not secured to the wall AND FURNISHINGS accross the hall from the 300 Hall Nurse's The Corridor handrail accross the hall Station. from the 300 Hall Nurse's Station was secured to the wall. 05/23/17 3-Based on observations, this facility has failed to keep clean HVAC distribution grilles free of dust and other particulates. Findings on 05/04/2017: The Staff Bathroom on the 300 Hall The Staff Bathroom in the 300 Hall has a return air grille was cleaned removing dust air grille that is clogged with dust and particulates. and particulates. C 166 Housekeeping-Maintained Free of Hazards C 166 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND **FURNISHINGS** (a) Adult care homes shall: It is a policy of Edenton House to (5) be maintained in an uncluttered, clean and maintain Free of Harzards as required orderly manner, free of all obstructions and in Rule SECTION .0300 - PHYSICAL hazards: PLANT 10 A NCAC 13F .0306 (e) This Rule shall apply to new and existing HOUSEKEEPING AND FURNISHINGS facilities. The facility has placed all oxygen This Rule is not met as evidenced by: cyclinders in approved cart/ racks. 05/23/17 1-Based on observation, the facility has not maintained in a safe manner by improper storage of oxygen cyclinders. This could affect all residents and staff by potentially exposing them

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PRINTED: 05/19/2017 FORM APPROVED Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: 01 B. WING HAL021009 05/04/2017 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 323 MEDICAL ARTS DRIVE **EDENTON HOUSE** EDENTON, NC 27932 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5)(EACH DEFICIENCY MUST BE PRECEDED BY FULL COMPLETE PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) C 166 Continued From page 2 C 166 to hazards for a ruptured ruptured cyclinder. Findings on 05/03/2017: There are oxygen bottles not stored in approved racks in the 300 Hall Med Room. C 189 Building Equipment Maintained Safe, Operating C 189 SECTION .0300 - PHYSICAL PLANT It is a policy of Edenton House that 10A NCAC 13F .0311 OTHER our Building Equipment be Maintained REQUIREMENTS Safe and Operating as required per (a) The building and all fire safety, electrical. Rule in SECTION 0300 - PHYSICAL mechanical, and plumbing equipment in an adult PLANT 10A NCAC 13F 0311 OTHER care home shall be maintained in a safe and REQUIREMENT operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) The sprinker head escutcheon was which shall not apply to existing facilities. replaced in the closet in Room 206. 05/23/17 This Rule is not met as evidenced by: 1-Based on observations, the facility fire protection equipment has not been maintained in a safe manner.

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Findings on 05/04/2017:

is located in the closet at Room 206.

The sprinkler head escutcheon is not in place that