

PRINTED: 05/20/2018  
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HAL061060	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  05/16/2018
NAME OF PROVIDER OR SUPPLIER  FOUR OAKS SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 588 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  Construction Section Biennial Survey report by Frank Strickland and Suzanna Fay on 05/16/2018:  Records indicate this facility was first licensed on 12/12/1988. An addition was licensed on 04/05/1994. The facility is currently licensed for 95 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 for the original building 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 and for the addition the 1991 Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1992 Rules for Licensing of Adult Care Homes of Seven or More Beds.  Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 164	Housekeeping and Furnishings-Clean, Repaired  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0300 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, this facility has failed to	C 164		

Division of Health Service Regulation

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

*Carrie A Faulkner*

TITLE

(X6) DATE

Executive Director

05/06/2018

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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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NAME OF PROVIDER OR SUPPLIER  FOUR OAKS SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 665 BOYETTE ROAD FOUR OAKS, NC 27524		
C 184	Continued From page 1 be kept clean and in good repair.  Findings on 05/16/2018: The Kitchen entry door from the Dining Hall has wood veneer that is delaminating and edges are damaged.  2-Based on observation, this facility has failed to be kept clean and in good repair,  Findings on 05/16/2018: The ceiling sheet-rock has become unfastened from the supporting structure in Room 415.  3-Based on observation, this facility has failed to be kept clean and in good repair.  Findings on 05/16/2018: The ceiling paint is peeling in the Bathroom shared by Rooms 313/315,  4-Based on observation, this facility has failed to be kept clean and in good repair.  Findings on 05/16/2018: All of the floor areas that meet the corridors, have run-off spotting from cleaning agents and wax that have resulted in incomplete floor finishes.	C 184	The kitchen entry door from the dining hall will be replaced. Estimated completion date: 6/30/18  The ceiling sheet rock will be refastened to the supporting structure. Estimated completion date: 8/30/18  The ceiling was painted in the shared bathroom by rooms 313/315  The floor areas that meet the corridors with run-off spotting will be stripped and waxed. Estimated completion date: 8/30/18	6/5/18
C 186	Housekeeping-Maintained Free of Hazards  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing	C 186		

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NAME OF PROVIDER OR SUPPLIER  FOUR OAKS SENIOR LIVING			STREET ADDRESS, CITY, STATE, ZIP CODE 565 BOYETTE ROAD FOUR OAKS, NC 27624		
(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 188	Continued From page 2 facilities.  This Rule is not met as evidenced by: 1- Based on observations, this facility has failed to store gas cylinders in a orderly manner to be free of hazards.  Findings on 05/16/2018: There are oxygen gas cylinder located in the Assisted Living Med Room that are free-standing and not in a storage racks.	C 188	All oxygen tanks are now stored in storage racks.	5/16/18	
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAÇ 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult 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 (a) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1- Based on observation, this facility has failed to maintain the fire safety components in a safe and operating condition.  Findings on 05/16/2018: The ansul spray nozzles are not directed to the cooking surfaces on the range because the unit has been moved away from the back wall.  2- Based on observation, this facility has failed to maintain the fire safety components in a safe and operating condition.	C 189	The range was moved back to the wall so ANSUL spray nozzles are directed to the cooking surfaces.	6/1/18	

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NAME OF PROVIDER OR SUPPLIER  FOUR OAKS SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 545 ROYETTE ROAD FOUR OAKS, NC 27524		
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C 189	Continued From page 3  Findings on 05/16/2018: The escutcheon does not cover an opening in the ceiling construction located in the back closet for Room 307.  3- Based on observation, this facility has failed to maintain the fire safety components in a safe and operating condition.  Findings on 05/16/2018: The Kitchen emergency wall light does not operate.	C 189	The escutcheon was replaced to cover the opening in the ceiling in the back closet for room 307  The kitchen emergency wall light battery was replaced and is now operational and functioning.	6/5/18  5/24/18
C 199	Exhaust Ventilation  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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, this facility has failed to exhaust ventilation at the rate of two CFM's per square foot.	C 199		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HAL061960	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  05/16/2018
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NAME OF PROVIDER OR SUPPLIER  FOUR OAKS SENIOR LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 565 BOYETTE ROAD FOUR OAKS, NC 27624
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C 199	Continued From page 4 Findings on 05/16/2018: The mechanical ventilation system is not operational at the following locations: (a) First Shower/300 HALL (b) Janitor Closet adjacent to Smoke Area	C 199	New ventilation fans will be ordered and they will be installed in the first shower on 300 hall and the janitor closet adjacent to smoke area. Estimated completion date: 6/30/18	
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