NAME OF			A. BUILDIN	NG: 01	COMF	LETED
NAME OF	·	HAL031006	B. WING _		06/1	2/2018
	PROVIDER OR SUPPLIER	STREET AL	DRESS, CITY	Y, STATE, ZIP CODE		
WELLIN	GTON PARK	329 COO	PER STRE	ET		
0(4) 15	OUR HARVES		VILLE, NC	28349		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROVIDERCY)	D BE	(X5) COMPLE DATE
C 000	Initial Comments		C 000	In Reference To:		:
	by Dennis Harrell an	on Section Biennial Survey of Ed Miller on 6-12-2018. s facility was first licensed as		Section .0300 - Physical 10A NCAC 13F .0301 Amli Of Physical Plant Dequire	Plant	
	a Home for the Aged 11-1-1967. Therefor 1971 and the applica	d serving 80 residents on re the facility must meet the able portions of the 2005	To Addition to the Control of the Co	(1) A. Sentinel moved money	hail	
	1967 North Carolina 407- for Group "D"-Ir	of Adult Care Homes, and the State Building Code Section astitutional Occupancy.		Pall Station Within required distance of Exit Door. Com	re d pleted	
i		ic- No less than '71 Rules	C 101	B. Sentinal moved warms	Nav	
And the state of t	PHYSICAL PLANT R The physical plant re care home shall be a	1 APPLICATION OF REQUIREMENTS quirements for each adult pplied as follows:		hoom, William required distance of Exit Door. Completed on of C. Sentinel Provided Pull stational Majhed Exit to the Kitchen	e 711118	
	licensed facilities or p facilities shall meet lid	t at the time of construction.		Completed 7117118 (2) Maintanence repositioned on 6119118. Sentinel Security	door	
1	renovation, or alterati the requirements for a no addition or renova	on; however in no case shall any licensed facility where tion has been made, be less		Systems Moved Alarm 6/25 In Reference To:		
ŀ	'Minimum and Desire Regulations" for "Hon	nes for the Aged and Infirm", vailable at the Division of		Section.0300- Physical Plan 10 A NCAC 13F. 0305 Physica Environment	•/	
	his Rule is not met a	as evidenced by:	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	(5) Maintanence Replaced Str Plate to ensure door would Latch Properly for Privacy.		
n a s	neet the Building Cod Itered. Building Code ystems to have pull s	ion, the facility failed to le when constructed or e requires fire alarm tations at each required	ļ.	Maintanence will routinely N all chors to ensure they late	lanter h	
on of Heal	xit. th Service Regulation			Correctly, Completed 6115/18		
PATORYD 12	RECTOR'S OR PROVIDER	SUPPLIER REPRESENTATIVE'S SIGNA	TURE	Director) DATE 71231

EX9E21

RECEIVED IN
JUL 26 2018

If continuation sheet 1 of 10

FORM APPROVED Division of Health Service Regulation (X3) DATE SURVEY (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION STATEMENT OF DEFICIENCIES COMPLETED AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: 01 HAL031006 06/12/2018 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 329 COOPER STREET WELLINGTON PARK KENANSVILLE, NC 28349 PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL (X5) COMPLETE (X4) ID PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) DATE TAG TAG DEFICIENCY) C 101 C 101 Continued From page 1 Findings on 6-12-2018; a. In the Men's Day room, the pull station is 27 feet from the exit. b. In the Women's Day room, the pull station is 32 feet from the exit. c. There is no pull station provided at the marked See Page 1 exit from the kitchen. 2. Based on observation, a new courtyard fence had been built outside a required and marked exit from the dining room that did not meet the Building Code for exiting. The Building Code requires doors and gates from spaces that can hold more than 50 people to swing outward. Finding on 6-12-2018; The courtyard could hold more than 50 people and the exit gate swings to the inside which could delay or obstruct evacuation in an emergency. C 132 C 132 Bathrooms-Must Provide Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL **ENVIRONMENT** (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be See Page I designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains: This Rule is not met as evidenced by: Based on observation, the door on the corridor bathroom between rooms 43 and 45 would not latch for privacy.

Division of Health Service Regulation

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EX9E21

If continuation sheet 2 of 10

7123118

Director 7/23118

Division	of Health Service Re				
	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIP A. BUILDING	LE CONSTRUCTION i: 01	(X3) DATE SURVEY COMPLETED
		HAL031006	B. WING		06/12/2018
NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY,	STATE, ZIP CODE	
14/F1 151/	OTON DADY	329 COOF	ER STREE	т	
WELLING	GTON PARK	KENANS	ILLE, NC 2	28349	
(X4) ID PREFIX TAG	(EACH DEFICIENCY	ITEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTIV (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	D BE COMPLETE
C 166	Continued From pa	ige 2	C 166	In Reference To:	
C 166	Housekeeping-Mai	ntained Free of Hazards	C 166	Section. 0300 - Physical 10 A NUAC 13 F. 0306 H	Plant
	SECTION .0300 - F	PHYSICAL PLANT		JECHON : 0500 - PNG MAN	weed reading
	10A NCAC 13F .03 FURNISHINGS	06 HOUSEKEEPING AND		10H 100HC 131,0300 11	Machary (
	(a) Adult care home	es shall:		and Furnishings	1 1 +
		in an uncluttered, clean and		(1) Sign was remposed and	browe!
	orderly manner, fre hazards;	e of all obstructions and		Patched by Maintanence. (ompleted
	(e) This Rule shall	apply to new and existing		6125/18	~ C \
	facilities.			(a) Allstate File Protection	lertoimed
		et as evidenced by:		Inspection and New Tag we Placed at Pull system. Di	octo
		vation, an exit sign in the 16 foot long side corridor and		Placed at Pull Sysicy. Di	inspection
		hat is marked by an exit sign.		Will Coutinue to Monitor I dates to ensure Inspection	of Cite
		rmer exit door are not required			
		e marked as one. The former ocked door to an office that is		done completed over 6 W	10N/NJ.
	cluttered with furnit	ure and other items and in no		Completed 6/28/2018	
	longer acceptable	as an exit.		(3)	
		ew of documents, the last		A. Maintanence Covered	hoth
		r inspection on the range hood stem was conducted in August		arrows so that only Exit	is
		ood fire suppression systems		Illuminated in Womens Da	4 ,
		every 6 months by a certified		Room. Maintanence Compl	eted
		y and the inspection must be where such as on the tag		on 7/13/18. Director will	\ \ \
	provided at the sys	tem pull.		Monitor ongoing for Con	nplianci
•	3. Based on obser	vation, the facility failed to be		L Maintanence Carred	tho
		hazards because of exits signs		In acrow so that only	F. 1
		the wrong directions. Exit ne wrong direction could delay		B. Maintanence Covered left arrow so that only is showing on the sign hoom 50. Completed	TXIT
	an evacuation in ar	n emergency.		15 Symmy 511 1 1 5, 3, 94	7110110
	Findings 6-12-2018 a. The required ex	s: it sign in the Women's day		DONAL 201 MANDICIECE	110110
	room has both the	exit arrows pointing in the			
vicion of 11	wrong directions fo ealth Service Regulation	r exiting.	<u> </u>		
IVISION OF H TATE FORI	- ~ /	0	6899	EX9E21	if continuation sheet 3 of
	th Value	(wh		\wedge 1	.
	V1-100m			Director	7123119

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIP A. BUILDING	PLE CONSTRUCTION G: 01	COMP	LETED
		HAL031006	B. WING		06/1	2/2018
	PROVIDER OR SUPPLIER	329 COOF	PER STREE			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	NTEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APP DEFICIENCY)	OULD BE	(X5) COMPLETE DATE
C 189	left arrow pointing i exiting. 4. Based on obser line was in direct comachine drain lines least 2 inches above required by Code, of contaminated. 5. Based on obser wand in the Beauty reach the sink basis breaker provided, are long enough to fixture present the contaminated water a vacuum breaker 6. Based on obser attached to the faur bathroom near roof basin and there was provided. Hoses of enough to reach the present the possibility water into the water breaker is installed. 7. Based on obser attached to the shor com 29. The loos fall hazard. Building Equipment SECTION .0300 - Fall NCAC 13F .03	vation, the ice machine drain ontact with the floor drain. Ice is that are not maintained at we the floor or floor drain, as could cause the ice to become vation, the hose on the shower Salon was long enough to an and there was no vacuum Hoses on water fixtures that reach the flood rim of the possibility of siphoning rinto the water system unless is installed. vation, there was a hose cet at the mop sink in the mass of the fixtures that are long enough to the flood rim of the possibility of siphoning rate was no vacuum breaker of the fixtures that are long enough to the fixture lity of siphoning contaminated raystem unless a vacuum vation, the drain grate was not over drain in the bathroom by the grate presented a trip and the Maintained Safe, Operating PHYSICAL PLANT	C 189	B. See Page 3 (4) Maintanence Sea both Copper and PUC lines So that both si than 2 inches above drain, Completed on (5) Casteen, Plumbing on the Shower Ward in Sclon. This will prevent the of Contaminated Water. Con 118118 (6) Casteen, Plumbing In a Uxuum Breatur at the Sink in the bathroom, Room 16. This will prevent Sighoning of Contamin Water. Completed 711 (7) Maintanence Pen Secured drain grate be floor with Sealantlap Maintanence Will row Monitor for Complian (completed 7113118)	t Greater Floor 1115118 Carne Breaker The beauty & Siphonin Smpleted Mop Year ATIL 8118	1
IVISION OF H	ealth Service Regulation	,	6899	EX9E21	If continuati	ion sheet 4 of 10
1.10W	m 000			Director		7123118

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01		(X3) DATE SURVEY COMPLETED	
		HAL031006	B. WING		06/12/2018
NAME OF I	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY,	STATE, ZIP CODE	
WELLIN	GTON PARK		PER STREE		
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPRODEFICIENCY)	D BE COMPLETE
C 189	REQUIREMENTS (a) The building an mechanical, and plucare home shall be operating condition (k) This Rule shall facilities with the exwhich shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much a shall not app This Rule is not much app This Rule is not mu	d all fire safety, electrical, ambing equipment in an adult maintained in a safe and apply to new and existing apply to new and existing apply to existing facilities. et as evidenced by: vation the magnetic hold open as-corridor fire and smoke ased the doors on fire alarm re-energized when the fire silenced. Magnetic hold open rgize before the fire alarm to a tould allow smoke and fire to a the facility. vation, battery powered and not work when tested. The regency lights that will not a least 90 minutes could ents and staff. This include the following areas: as day room, om 24, Note; This deficiency	C 189	In heterence To: Section 0300-Physical 10A NCAC 13 F.0311 C Requirements (1) Sentinel Came and re-Programed thre System 50 the doors would not energizefulhen System is Silenced. Completed on Confleted The Horizon B. Warsaw Heating & Air replaced with New Emerger light at the Meyo day Roo. If was deemed in good I Order. Completed Thells Condons day room Emerge I was deemed in good I Order. Completed Thells C. Warsaw Heating & Air Womens day room Emerge light with a new Emergi light with a new Emergi light with a new Emergi light completed Thells D. Warsaw Heating & Air Re Mens day room with New E light, Completed Thells. Continued to Page 6 Continued to Page 6	cm re- 16/29/18 16/29/18 Cheched 100/Ling 100/Ling 100/Ling 100/Ling 100/Ling
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Division of Health Service Regulation

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STATEMEN	OF MEAN SERVICE RE OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01		(X3) DATE SURVEY COMPLETED			
		HAL031006	B. WING		06/12/2018			
NAME OF	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY,	STATE, ZIP CODE				
	329 COOPER STREET							
WELLIN	GTON PARK	KENANSV	ILLE, NC 2	8349				
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	D BE COMPLETE			
C 189	4. Based on observare prevented from resist the passage of doors that do not of present the possibility one space can quict the remainder of the Findings include; a. The fire wall doc completely and later alarm system. b. The door to roor c. The door to roor c. The door to roor closed. e. The exit door ne closed. f. The strike is missible. The double door latch when closed. h. The double door latch when closed. h. The double door latch when closed. h. The double door latch when closed in the later was a hole closet near room 2. j. The door to the lid damaged at the later k. The door to the later has a later	dining room did not work on it. vation, many corridor doors closing quickly and latching to of fire and smoke. Corridor ose completely and latch ity that a fire that begins in kly spread to the corridor and a facility. ors near room 37 do not close h when activated by the fire on 2 will not latch when closed. Men's bathroom near room 10 closed. In 50 will not latch when ar room 50 will not latch when at the exit door near room is to the dining room do not one of the dining room drag and one. In the thin the thin the linen one closet near room 2 was cheet. Men's bathroom near room 10 ning properly to be resistant to	C 189	3) Worsaw Heating & Hir (of dining room exit styn with Ext sign. Director & Maintan will monitor to BROWE Completed 7119118 A. Maintanence adjusted do on fire door near room 37. Go on b113118 B. Maintanence adjusted sto ensure the door to room want latch Properly. Completed b131118 P. Maintanence adjusted so door would latch Properly. Completed b131118 D. Maintanence adjusted on door to room 50 so do want close Correctly. Completed b131118 D. Maintanence added new on 6015118 E. Maintanence added new and Striker Plate to exit door	ence chice chice chick c			
N. delen - 41	lealth Service Regulation		1	<u> </u>				

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Division of Health Service Regulation

EX9E21 Director If continuation sheet 6 of 10

	of Health Service R	egulation	(X2) MULTIF	PLE CONSTRUCTION	(X3) DATE	
AND PLAN	OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING	G: 01	COMP	PLETED
HAL031006		B. WING		06/12/2018		
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY,	STATE, ZIP CODE		
WELLIN	GTON PARK		PER STREE /ILLE, NC			
(X4) ID PREFIX TAG	(EACH DEFICIENC	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	D BE	(X5) COMPLETE DATE
C 189	5. Based on obser RCC office is cut ir and is not provided allow it to close quipassage of fire and do not close compl possibility that a fir quickly spread to the facility. Findings on 6-12-2 a. The top half of latch when closed. b. There is a gape doors that is sealed gasket. 6. Based on obserfire rated walls and in several locations are not sealed with one-hour fire rated possibility that a fir quickly spread to crindings include: a. Plywood patch, high, on the wall in b. Plywood patch, high, on the wall in Hole in the ceiling c. Plywood patch, high, on the wall in d. Unrated sliding inches, separating the corridor. e. Unsealed patch ceiling in main election.	evation, the corridor door to the a 2 pieces like a "Dutch" door with the proper hardware to ckly and latch to resist the smoke. Corridor doors that etely and latch present the enthat begins in one space can be corridor and the remainder one corridor does not automatically of about 7/16 inch between the divith combustible rubber on the combustible rubber on the construction, the required one-hour of ceilings were compromised and penetrations that the materials approved for use in construction present the enthat begins in one space can on the the deprise of the facility. 30 inches wide by 60 inches bedroom 40, 48 inches wide by 60 inches main laundry, of the nurse station, 30 inches wide by 60 inches the beauty parlor, glass window, 24 inches by 24 the Administrator's office from the facility of 1/2 inch gypsum board to ctrical room. It water line in main electrical trations (2) in the ceiling of the histrator's office,	C 189	(4) Continued H. Hinges adjusted on a doors to diving room to Prediction and to ensure they cle Roparing and to ensure they cle Roparing Maintance Complete on I. Maintanence Painted & Prediction of Smartanence Pages 1. Maintanence Pages 1. Completed on 6/29/118 K. Maintanence Pages 1. Completed on 6/29/118 K. Maintanence Pages 1. Maintanence Pages 1. Strikes Plate Draw ballnoom door near room this will prevent the Passe of 5 mohe. Completed on L. Maintanence adjusted so That The door to room	atthe or a law of the	Continued to page
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Division of Health Service Regulation								
* · · · · = · · · = · · · · · · · · · ·		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	` '	LE CONSTRUCTION	(X3) DATE SURVEY COMPLETED			
AND PLAN OF CORRECTION		IDENTIFICATION NOWBER.	A. BUILDING	: 01				
		HAL031006	B. WING		06/12	/2018		
			DDEGG OFFV	CTATE ZID CODE	1			
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 329 COOPER STREET								
WELLIN	GTON PARK		/ILLE, NC 2	28349				
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	.D BE	(X5) COMPLETE DATE		
C 189	Continued From pa	age 7	C 189	(4) Continued				
	day room, i. Unsealed penetration in ceiling in small laundry near Men's day room, j. The smoke detector in room 31 was not tightly fitted to the ceiling. 7. Based on observation, an electrical outlet and conduit was hanging off the wall in the RCC office.			regularly Monitor doors latches to make Sure II are in Compliance. (5) A. Director Ordered M	8			
	8. Based on observation, the globe was missing on an exterior light in the new courtyard. Missing globes could cause the bulb to break and expose electrified parts.			on 719118 From Reidson Building Supply. Delive date Set for August 2	,2018			
C 195	SECTION .0300 - F 10A NCAC 13F .03 REQUIREMENTS (d) The hot water of provide an adequal kitchen, bathrooms closets and soil util temperature at all five be maintained at a (38 degrees C) and F (46.7 degrees C) (k) This Rule shall facilities with the exwhich shall not appoint the same of the bathroom near	system shall be of such size to te supply of hot water to the s, laundry, housekeeping lity room. The hot water fixtures used by residents shall minimum of 100 degrees F d shall not exceed 116 degrees b. apply to new and existing exception of Paragraph (e) oly to existing facilities. et as evidenced by: ion, the hot water temperature found to be 122 degrees F. in room 10. Hot water	C 195	Core 20 Minute fire rate Polacement door. Ordered to be delivered 812/18. be installed to conface. Will (b) A. Maintonence replaced With \$18 Fire hated Gypsum Bedroom Completed on blad room Plywood Patch With \$18 Polaced L. Toom Plywood Patch With \$18 Polaced L. Completed by Maintonence, replaced L. Pated Gypsum Boord. Completed by Cated Gypsum Boord.	Cd 7/19/18 W.1/ Dutch I Enstall Poach. Boach. Bla. Boach. Bla. Brie			
Division of L	'			J				
C 195	h. Damaged ceiling day room, i. Unsealed penetr near Men's day roo j. The smoke deter fitted to the ceiling. 7. Based on obser conduit was hangin office. 8. Based on obser on an exterior light globes could cause electrified parts. Hot Water System SECTION .0300 - F. 10A NCAC 13F .03 REQUIREMENTS (d) The hot water sprovide an adequal kitchen, bathrooms closets and soil util temperature at all five bemaintained at a (38 degrees C) and F (46.7 degrees C) (k) This Rule shall facilities with the exwhich shall not app. This Rule is not m Based on observat was checked and fithe bathroom near	g in small laundry near Men's ation in ceiling in small laundry om, ctor in room 31 was not tightly vation, an electrical outlet and ig off the wall in the RCC vation, the globe was missing in the new courtyard. Missing in the new courtyard. Missing the bulb to break and expose experience to the supply of hot water fixtures used by residents shall minimum of 100 degrees For dishall not exceed 116 degrees to apply to new and existing exception of Paragraph (e) only to existing facilities. Let as evidenced by: L	C 189	Director & Maintanence (egularly Monitor doors latches to make Sure II are in Compliance. A. Director Ordered M. Director Ordered M. Director Ordered M. Bulding Supply. Deliver date Set for Alugust 2 B. Director Ordered S. Director Ordered S. Coxe 20 Minute fire cate (eplacement door. Ordered S. De Installed to coplace to be delivered & 12/18. be Installed to coplace. Will some of the bedroom Completed on black of Maintanence replaced Loom Plywood Patch Will S. Matel Gypsum Board. Completed on place of the place	Jew Doc 119118 119118 119118 119118 119118 119118 119118 119118 119118 119118 119118 119118 119118			

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Division of Health Service Regulation							
STATEMEN	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIP A. BUILDING	LE CONSTRUCTION 5: 01	(X3) DATE SURVEY COMPLETED		
HAL031006		B. WING		06/12/2018			
NAME OF F	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY,	STATE, ZIP CODE			
WELLING	STON PARK		PER STREE				
(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 CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	D BE COMPLETE		
C 195	Continued From page 8		C 195	C. Beauty Parlor, Plywood replaced			
	the possibility of bu	rning residents.		with 513 Fire Rated Gypsum boa 7119118	10. UN		
C 199	Exhaust Ventilation		C 199	D. Sliding Glass Window between	en Admia.		
	SECTION .0300 - F 10A NCAC 13F .03 REQUIREMENTS			office & The Conidor was patched with \$18 Fire haled Expourm on E. Mary towence scaled Patch o	7 600ccd		
	(g) The spaces list provided with exhau	ed in this Paragraph shall be ust ventilation at the rate of	AND THE PROPERTY OF THE PROPER	Exercical hoom. Completed on 6	n Marin		
	requirement does no before April 1, 1984	ninute per square foot. This not apply to facilities licensed i, with natural ventilation in	AND THE PROPERTY OF THE PROPER	F. Maintanence used Fire Coul Scal around water line is many			
	these specified spa (1) soiled linen sto	rage;		hoom. Completed on 6/19/18 G. Maintanence used Fire Caulle			
	(2) soil utility room(3) bathrooms and		THE PERSONNEL PROPERTY OF THE PERSONNEL PROP	Constrations in Admin office (iloset.		
	(4) housekeeping(5) laundry area.			Conglisted on 6/19/18 H. Maintonce Patched and 10-00	and b. d		
	facilities with the ex	apply to new and existing ception of Paragraph (e)		durage in Small Lounder Com.			
		ly to existing facilities.		II. I MANTANENCE 1150 & Tue of	to seal		
	Based on observati	et as evidenced by: on the facility failed to	MACCHANGE AND	Completed on Glagus	n Ciling.		
	Findings on 6-12-20			J. Maintanence Property Secure detector to Ceiling in room II. Com	Metra GIISTIX		
	bathroom near room	ovided was not working in the m 10. ovided was not working in the		(7) Maintenence Secured the KIC Dallet back to wall. Completed	1112118		
	bathroom near room			(3) Warson Heating & Air Replaced to Gurtyard on 7120118.	Fixture		
	bathroom near room			+ Maintanence & Viveter Will Monito	i holes		
	laundry near Men's			Tenetrations to Assure Compline In Reterence To:	_		
C 202	Existing Fac. Housi	ing Non-ambs-Hand Bells	C 202	Section .0300 - Physical Plant NCAC 13, F. 0341 Other Required	Mants		
	SECTION .0300 - F 10A NCAC 13F .03			- Water advisted Immediatly to 11 Maintanence & Director will Contin Continue to Page 10.	00-116F.		
	salth Camilea Deculation		1				

Director

If continuation sheet 9 of 10

7/23/18

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION COMPLETED **IDENTIFICATION NUMBER:** A. BUILDING: 01 B. WING HAL031006 06/12/2018 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 329 COOPER STREET **WELLINGTON PARK** KENANSVILLE, NC 28349 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (X4) ID ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX PRÉFIX DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) Monitor & Accord temperatures weekly to C 202 C 202 Continued From page 9 assure angoing Compliance. Completed 6/12/18 REQUIREMENTS Sation. 0300-Physical Plant 10A NCAC 13F.
0311 other Requirements.
A. Bathroon Exhaust Near Am 10 replaced
with New Exhaust by Narsaw Heating Julia
on 7119118 (j) Except where otherwise specified, existing facilities housing persons unable to evacuate without staff assistance shall provide those residents with hand bells or other signaling B. Wareau Hashing & Air Ordered Mew Exhaust
Motor for bathroom expect him 2000 7/19/18.
Will Install on 7/25/18 by Warsaw Heating thir.
C. Wagsaw Heating & Mr. Ordered New Exhaust
Mobor for buth room war Rimal on 7/19/18. U.il
Install 7/25/18 by Warsaw Heating & Mir.
D. Warsaw Heating & Air Install 1/25/18 Colored devices. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. D. Warsaw Heating & Ar Installed New Exhaust on 7119118 in Small Laundry hoom New Mans This Rule is not met as evidenced by: Based on observation, the facility has an electrical call system provided with switches In Reference To: located at each bed. The several switches Section .0300-Physical Plant 10A NCAC 13 F. 0311 other Requirements. tested failed to activate the call system. A malfunctioning call system can delay staff response to an emergency. - Whistles were replaced with hand bells. Ace gave handbells to non-Ambulatory Residents on 7119118 Director Will Monitor to Maintain Compliance - All Items Noted have Completion dates and have been Completed. Director; RCC; and Maintainence Shaff will Continue to Mantain on a Monthly basis to Maintain audity Assurance and assure that Deficient Practice dos not 7183118