

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL027003	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 07/11/2019
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NAME OF PROVIDER OR SUPPLIER CURRITUCK HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 141 MOYOCK LANDING DRIVE MOYOCK, NC 27958
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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}	Initial Comments Report of a Biennial Follow Up Construction Survey report by Frank Strickland on 07/11/2019: There are previous cited deficiencies from the Biennial Construction Survey that require corrective action and a new Plan of Correction is required.	{C 000}		
{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 observations, this facility has not maintained the floors to be kept clean and in good repair. Findings on 07/11/2019: (c) Resident bathrooms - there was a pattern of loose and buckling vinyl floors in the bathrooms which pose a tripping hazard. Many of the floors had holes and gaps in the vinyl at the seams, the walls and at the plumbing fixtures. None of the vinyl floors have been repaired since the Biennial Survey on November 16, 2018.	{C 164}		

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