<table>
<thead>
<tr>
<th>ID TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>ID TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCE TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>C 000</td>
<td>Initial Comments</td>
<td>C 000</td>
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<td></td>
<td>The Complaint alleged that the facility has bed bugs.</td>
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<td></td>
<td>Records indicate this facility was first licensed on 5-28-1997, for 60 beds. Based on this</td>
<td></td>
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<tr>
<td></td>
<td>information, the facility was surveyed for conformance with the 1996 edition of the North</td>
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<td></td>
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<tr>
<td></td>
<td>Carolina State Building Code, Institutional Occupancy, the 1996 Rules for Homes for the Aged</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>and Infirm Minimum Desired Standards and Regulations and the applicable portions of the</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>2005 Rules for Adult Care Homes of Seven or More Beds.</td>
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<td></td>
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<tr>
<td></td>
<td>The Complaint was substantiated.</td>
<td></td>
<td></td>
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<tr>
<td>C 110</td>
<td>Construction-Meet Sanitary Requirements</td>
<td>C 110</td>
<td></td>
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</tr>
</tbody>
</table>

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Megan King

Title: 12/16/19

STATE FORM L61L21

If continuation sheet 1 of 4
**Continued From page 1**

Center, Raleigh, North Carolina 27699-1632 at no cost.

This Rule is not met as evidenced by:

Based on observation, interview with Administrator and review of available records, the facility was not in compliance with The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions". Specifically 15A NCAC 18A.1317 (a) [which requires that] Effective measures shall be taken to keep... vermin out of and to prevent their breeding and presence on the premises.

The facility does not have effective measures to prevent bed bugs from breeding and being present on the premises.

Findings on 11-22-2019:

a. Interview with the Administrator revealed the current bedbug problem has been ongoing since October of 2018.

b. Review of available Pest Management Company (PMC) service tickets indicated 12 rooms were treated on 9-26-2019 and 7 rooms were treated 11-23-2019. The following rooms have been treated for bed bugs: 4, 5, 12, 22, 28, 29, 31, 32, 34, 37, 38, 40 & 41.

c. Direct observation of Resident rooms 31 revealed 2 live bed bugs.

**Pest control treatment for six rooms was completed on 12/03/2019. Ongoing treatment will be performed.**

C 164 Housekeeping and Furnishings-Clean, Repaired

**SECTION .0300 - PHYSICAL PLANT**

10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS
C 164 Continued From page 2

(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.

Residents rooms will be vacuumed daily and deep cleaned on a monthly schedule. Executive Director to monitor every month.

This Rule is not met as evidenced by:
Based on Observation, the facility failed to keep walls, ceilings, floors or floor coverings and furniture clean and in good repair.

Findings on 11-22-2019:
The facility is not effectively erasing signs of bed bug activity to make it easier to identify where live bed bugs are so that treatment can be focused where it is needed.
a. Direct observation of Resident rooms 32 revealed 2 dead bed bugs.
b. Direct observation of Resident room 38 revealed at least 15 dead bed bugs.

C 166 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 facilities.

This Rule is not met as evidenced by:
1. Based on observation, electrical plates were missing exposing energized wires and parts.
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<tr>
<td>C 166</td>
<td>Continued From page 3</td>
<td>Exposed wiring could be a hazard to the residents. Findings on 11-22-2019; Several receptacle plates were missing in room 12.</td>
<td>C 166</td>
<td></td>
<td>All receptacle plates will be replaced. Maintenance and Executive Director to monitor receptacle plates every month.</td>
<td>12/15/2019</td>
</tr>
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