Division of Health Service Regulation

	IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION  A. BUILDING: <b>01</b>		(X3) DATE SURVEY COMPLETED			
	HAL043033	B. WING		01/2	3/2020		
		DRESS CITY S	STATE ZIP CODE		0.2020		
217 JONESBORO ROAD							
ARC OF DUNN DUNN, NC 28334							
(EACH DEFICIENCY	MUST BE PRECEDED BY FULL	ID PREFIX TAG	(EACH CORRECTIVE ACTION SHOUL	D BE	(X5) COMPLETE DATE		
Initial Comments		C 000					
Frank Strickland con This facility was lice twelve-bed facilities twelve bed addition which joined the thre thirty-six beds under information, we are the 1996 Rules for t Homes, the applical Regulations for Adu Edition of the North Code-Institutional O BED SCU)	nsed on 02/02/1988 for two. However, in 2003 a new was added on to the facility ee facilities for a total of rone license. Based on this requiring tha this facility meet he Licensing of Adult Care ble portions of the 2005 It Care Homes, and the 2002 Carolina State Building occupancy I-2. (Currently a 36 een cited and a Plan of						
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-Base on observation, this facility has not kept the ceilings clean and in good repair.  Findings on 01/23/2020:		C 164					
	SUMMARY STA' (EACH DEFICIENCY REGULATORY OR LS)  Initial Comments  Construction Section Frank Strickland construction Section Which joined the threshold that the section Sectio	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)  Initial Comments  Construction Section Biennial Survey report by Frank Strickland conducted on 01/23/2020:  This facility was licensed on 02/02/1988 for two twelve-bed facilities. However, in 2003 a new twelve bed addition was added on to the facility which joined the three facilities for a total of thirty-six beds under one license. Based on this information, we are requiring that his facility meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Regulations for Adult Care Homes, and the 2002 Edition of the North Carolina State Building Code-Institutional Occupancy I-2. (Currently a 36 BED SCU)  Deficiencies have been cited and a Plan of Correction is required  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-Base on observation, this facility has not kept the ceilings clean and in good repair.	STREET ADDRESS, CITY, S DUNN  217 JONESBORO RO DUNN, NC 28334  SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)  Initial Comments  C 000  Construction Section Biennial Survey report by Frank Strickland conducted on 01/23/2020:  This facility was licensed on 02/02/1988 for two twelve-bed facilities. However, in 2003 a new twelve bed addition was added on to the facility which joined the three facilities for a total of thirty-six beds under one license. Based on this information, we are requiring tha this facility meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Regulations for Adult Care Homes, and the 2002 Edition of the North Carolina State Building Code-Institutional Occupancy I-2. (Currently a 36 BED SCU)  Deficiencies have been cited and a Plan of Correction is required  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-Base on observation, this facility has not kept the ceilings clean and in good repair.	PROVIDER OR SUPPLIER  STREET ADDRESS, CITY, STATE, ZIP CODE  217 JONESBORO ROAD  DUNN, NC 28334    SUMMARY STATEMENT OF DEFICIENCIES   ICACH DEFICIENCY MUST BE PRECEDED BY FULL   REGULATORY OR LSC IDENTIFYING INFORMATION    PREFIX TAG   Initial Comments   C 000	PROVIDER OR SUPPLIER  STREET ADDRESS, CITY, STATE, ZIP CODE  217 JONESBORO ROAD  DUNN, NC 28334  SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)  Initial Comments  C 000  Construction Section Biennial Survey report by Frank Strickland conducted on 01/23/2020:  This facility was licensed on 02/02/1988 for two twelve bed facilities. However, in 2003 a new twelve bed addition was added on to the facility which joined the three facilities for a total of tirty-six beds under one license. Based on this information, we are requiring tha this facility meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Regulations for Adult Care Homes, and the 2002 Edition of the North Carolina State Building Code-institutional Occupancy I-2. (Currently a 36 BED SCU)  Deficiencies have been cited and a Plan of Correction is required  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; (6) This Rule is hall apply to new and existing facilities.  This Rule is not met as evidenced by; 1-Base on observation, this facility has not kept the ceillings clean and in good repair.		

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

(X6) DATE TITLE

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:				DATE SURVEY COMPLETED	
		HAL043033	B. WING		01/2	01/23/2020	
NAME OF I	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY, S	STATE, ZIP CODE	-		
ARC OF DUNN 217 JONESBORO ROAD DUNN, NC 28334							
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES  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 164	exhaust fan housin compromising the colocated at the Men'  2-Base on observathe ceilings clean a Findings on 01/23/2 The paint is peeling ceiling in the Women	k openings around the ceiling g that are not fire protected one-hour roof/ceiling assembly s Hall/Can Wash Room.  tion, this facility has not kept nd in good repair.  2020: g rather extensively from the en's Hall/Non-Smoking Room.	C 164				
C 189	SECTION .0300 - PHYSICAL PLANT 10A NCAC 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 (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1-Base on observation, this facility has not maintained the fire safety equipment in a safe and operating condition.  Findings on 01/23/2020: The emergency corridor light that is located		C 189				
	in the emergency n  2-Base on observa	tion, this facility has not nbing equipment in a safe and					

Division of Health Service Regulation

STATE FORM SWMF21 If continuation sheet 2 of 3

Division of Health Service Regulation

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C 189 Continued From p	Continued From page 2							
Findings on 01/23 The faucet is very the Women's Hall  3-Base on observ maintained the Bu condition.  Findings on 01/23	/2020: rusted at the hand wash sink in /Shower Room. ation, this facility has not ilding a safe and operating //2020: e is damage and not secure in	C 189						

Division of Health Service Regulation