		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01		(X3) DATE SURVEY COMPLETED	
			A. BOILDING.	VI	,	₹
		HAL007025	B. WING			9/2024
NAME OF F	PROVIDER OR SUPPLIER	STREET AL	DRESS, CITY, S	STATE, ZIP CODE		
PANTEG	O REST HOME		MP ROAD O, NC 27860			
(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 CORREC' (EACH CORRECTIVE ACTION SHOI CROSS-REFERENCED TO THE APPR DEFICIENCY)	JLD BE	(X5) COMPLETE DATE
{C 000}	Initial Comments		{C 000}			
	Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on June 19, 2024.					
		cies from the Biennial by that remain to be corrected.				
{C 160}	Outside Premises-	Clean, Safe	{C 160}			
	SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;					
	1. Observations re	et as evidenced by: evealed that the outside naintained in a clean and safe				
	front side of the factory.	the exterior soffit at the right bility has rotted and is hanging				
	front entry has dete attached. b. Enclosed Porch	the exterior soffit left of the eriorated and is no longer - the left front window glass is				
	screens around the accumulation of de the screens and the					
	post and a section	facility - there is one rotting of broken concrete laying in de yard. There are multiple				

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

(X6) DATE TITLE

Division	<u>of Health Service Re</u>	egulation				
	STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01		(X3) DATE SURVEY COMPLETED	
	HAL007025		B. WING		R 06/19/2024	
NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
			MP ROAD			
PANTEG	O REST HOME	PANTEGO	O, NC 27860			
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{C 160}	Continued From pa	ge 1	{C 160}			
	There is ongoing w	are creating trip hazards. ork with the drainage system ull of water and piles of dirt the building.				
{C 164}	Housekeeping and	Furnishings-Clean, Repaired	{C 164}			
	FURNISHINGS (a) Adult care home (1) have walls, ceil coverings kept clea (2) have no chronic (3) have furniture of	06 HOUSEKEEPING AND				
		et as evidenced by: vealed that the furniture and ot kept in good repair.				
	Findings on June 1 c. Room 9 - there i	9, 2024: s a 3" hole in the closet door.				
	2. Observations re ceilings were not ke	vealed that the walls and ept in good repair.				
	an old patch is open diameter area near water stain and the bubbling and flaking b. There is a 6" x 1 corridor wall outside	is a crack in the ceiling where ning up. There is a 24" the closets that has a yellow finish within the stain is g. 2" hole knocked into the e of the kitchen door. The wall across from the hole is				

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		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
			A. BUILDING: 01			
		HAL007025	B. WING		F 06/1	9/2024
NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
DANTEC	O REST HOME	143 SWAI	MP ROAD			
PANTEG	O REST HOME	PANTEGO	O, NC 27860			
(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 APPROI DEFICIENCY)	D BE	(X5) COMPLETE DATE
{C 164}	Continued From pa	ge 2	{C 164}			
	flaking and peeling. d. Kitchen - there is	Il by the handwashing sink is an accumulation of grease C grille in front of the hood.				
{C 166}	Housekeeping-Mair	ntained Free of Hazards	{C 166}			
	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 the facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility.					
	bottles unsecured in Interview with staff purchased by a pre	Room - there are oxygen n a shallow plastic crate. revealed that these were vious resident's family and able to locate a vendor to				
	full of oxygen bottle	here is a shallow plastic crate s without any means of the bottles from falling or				

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getting knocked over.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPL A. BUILDING:	PLE CONSTRUCTION (X3) DATE COM		SURVEY LETED
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NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
PANTEG	O REST HOME	143 SWAN PANTEGO	MP ROAD D, NC 27860			
(X4) ID	SUMMARY STA	ATEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CORRECTION	DN	(X5)
PREFIX TAG	(EACH DEFICIENC)	Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPROI DEFICIENCY)	D BE	COMPLETE DATE
{C 189}	Building Equipment	t Maintained Safe, Operating	{C 189}			
	mechanical, and plicare home shall be operating condition (k) This Rule shall facilities with the exwhich shall not app. This Rule is not med. Based on obsermaintain the buildir safe condition. Hole through fire resistant fire and smoke to sorigin. Findings on June 1 a. Enclosed Porch secure leaving a garceiling.	and all fire safety, electrical, umbing equipment in an adult a maintained in a safe and apply to new and existing acception of Paragraph (e) by to existing facilities. et as evidenced by: vation there is a failure to ag's fire safety systems in a ses or gaps at penetrations are rated ceilings could allow apread beyond the area of ap in the fire resistant rated				
	is not secure leaving rated ceiling.	cover in the right back corner ag a gap in the fire resistant an unsealed cable bundle in				
	the front corner of t d. There is an unse					
	e. Laundry - the pa	anel above the water heater ne perimeter and the water t sealed where they penetrate				
	f. There are three soutside of Room 16	small holes in the ceiling 5. there are two unsealed				
		he ECO Smart panel.				

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			(X3) DATE COMP	SURVEY LETED
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		HAL007025	B. WING			9/2024
NAME OF I	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY, S	STATE, ZIP CODE		
PANTEG	O REST HOME	143 SWAM	_			
()(4) ID	CHMMADV CTA	TEMENT OF DEFICIENCIES), NC 27860	PROVIDER'S PLAN OF CORRECTION		(VE)
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{C 189}	Continued From pa	ge 4	{C 189}			
	maintain the facility safe operating cond compartment could doors do not compl limit the spread of sorigin.	vation there is a failure to 's fire safety equipment in a dition. Occupants in the smoke be exposed to smoke or fire if etely close and latch to help smoke or fire to the area of				
	Findings on June 19, 2024: a. Room 2 - the latch plate is missing and the door does not close and latch. b. Room 3 - the bottom hinge is loose and the door is dragging heavily on the floor. c. Room 10 - the door is dragging heavily on the floor requiring excessive force to open. This was corrected at the time of survey.					
	3. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition.					
	Findings on June 19, 2024: b. Men's Bath - the right sink is not secure to the wall.					
	install plumbing pip equipment in a safe condition. Failure to plumbing devices a manner or in opera occupants of the fa does not operate as pressure relief valve with an approved m 6" of the grade belo					
Findings on June 19, 2024: b. Laundry Room - the water heater pressure						

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		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01		(X3) DATE SURVEY COMPLETED	
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		HAL007025	B. WING		06/1	9/2024
NAME OF F	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY, S	STATE, ZIP CODE		
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), NC 27860	DROVIDEDIS DI ANI OF CORDECTI	ON	()(5)
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{C 189}	Continued From pa	ge 5	{C 189}			
	relief valve has not	been piped.				
		vealed that the mechanical aintained in a safe and				
	Findings on March 26, 2024: a. There are two duct openings outside of Laundry for the dryer vents. Neither has a cover or cap to prevent pests from entering the facility.					
	6. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment did not function during a fire.					
	Findings on June 19, 2024: a. Clean Linen - the bottom plate on the heat detector is bent 90 degrees. b. Oxygen Supply Closet - the heat detector is dangling from its wires.					
	equipment is not be operating condition plates on electrical	vation, the electrical eing maintained in a safe . Missing or broken cover devices may cause injury to e facility if wiring is exposed.				
	Findings on June 19 b. The top of the co security panel is bro	over plate on the outlet at the				
		vation, the electrical aintained in a safe and				
	Findings on June 19 a. Kitchen Pantry -	9, 2024: the light lens is damaged and				

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STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA		(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY		
AND PLAN	AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		A. BUILDING: 01		COMPLETED	
		HAL007025	B. WING		R 06/19/2024	
NAME OF F	PROVIDER OR SUPPLIER		DRESS CITY S	STATE, ZIP CODE	1 00/1	0/2024
		143 SWAN		STATE, ZII CODE		
PANTEG	O REST HOME), NC 27860			
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{C 189}	Continued From pa	ge 6	{C 189}			
	hanging from the fra	ame.				
	3 3					
{C 195}	Hot Water System		{C 195}			
	provide an adequat kitchen, bathrooms closets and soil utili temperature at all fi be maintained at a (38 degrees C) and F (46.7 degrees C). (k) This Rule shall facilities with the ex	system shall be of such size to e supply of hot water to the laundry, housekeeping ty room. The hot water xtures used by residents shall minimum of 100 degrees F shall not exceed 116 degrees				
	This Rule is not met as evidenced by: 1. Observations and testing revealed that the hot water temperature at all fixtures used by residents was not maintained between 100 degrees F and 116 degrees F.					
	was 130 degrees F been installed. The heater was adjusted	rater temperature at the sink . A new water heater had just thermostat on the water d. The door was secured and unning to get the temperature				

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