Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL054067	A. BUILDING: 01 B. WING _____	C 07/21/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE VILLAGE OF KINSTON	1935 IDLEWILD DRIVE KINSTON, NC 28504

(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 Complaint Investigation by Frank Strickland on 07/21/2016: The Complaint alleged that there were bed bugs. Based on information from our files, this facility was first licensed or submitted on or about March 9, 1993 as a Home for the Aged with Twenty-Nine (29) beds. On or about April 24, 2002, a Thirty-Four (34) bed addition was approved. The facility is currently licensed for a capacity of Sixty-Three (63) beds, includuing Twenty-Six (26) Special Care beds. Based on the above information, we are requiring the facility to meet the 1991 Rules and Regulation for Adult Care Homes; the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes; and the 1991 North Carolina State Building Code (original building); and the 2002 North Carolina State Building Code Institutional Occupancy (Addition). The Complaint is SUBSTANTIATED. Deficiencies have been cited and a 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.	C 164	The bed bug situation was identified and abated prior to the complaint survey. No bed bugs were found at the time of the survey. The carpet in Resident Room 8 will be replaced by September 23, 2016. The facility will continue to monitor the condition of all floors and floor coverings on an ongoing basis so that they are kept clean and in good repair. The Village of Kinston Assisted Living, LLC By: Kenny Burrow Kenny Burrow, Manager September 14, 2016	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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C 164	Continued From page 1 This Rule is not met as evidenced by: 1- Based on observations and record review, this facility does not have walls, ceilings and floors or floor coverings kept clean and in good repair which has resulted in a continuing bed bug issue. Findings on 07/21/2016: The following resident rooms have been identified for having bed bugs: (a) Room 4: Bed bugs were observed and treated on 03/28/2016. (b) Room 6: Bed bugs were observed and treated on 03/28/2016 and 06/14/2016. (c) Room 8: Bed bugs were observed and treated on 07/12/2016. (d) Room 13: Bed bugs were observed and treated on 03/28/2016 and 07/12/2016. (e) Room 28: Bed bugs were observed and treated on 06/14/2016 2- Based on observation, this facility has failed to have floors or floor coverings kept clean and in good repair. This makes monitoring the elimination of bed bugs difficult. Findings on 07/21/2016: (a) Resident Room 8 has carpet that is damaged, spotted and dirty.	C 164		