STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL041072	A. BUILDING: **01** B. WING _____	R **03/02/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WELLINGTON OAKS	**3004 DEXTER AVENUE GREENSBORO, NC 27407**

(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 by Ed Miller, conducted on March 2, 2017. The following deficiencies cited during the previous Biennial Follow Up Construction Survey, have not been satisfactorily corrected and will require a new Plan of Correction.	{C 000}		
{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, the Building was not maintained free of hazards, because general maintenance was not being done or had not been completed. This could affect all residents, staff and visitors if items are broken or partially removed and left where they could injure all. Findings on March 2, 2017: a. Courtyard 2 - The concrete slab for the Courtyard has dropped at least 4 inches in the back left corner, cracking the slab. (Work to start March 7, 2017 and completed by March 14, 2017) b. Courtyard 2 - The rain and roof runoff from the rain is funneling to this courtyard which has two small area drains that appear to not be capable of handling this amount of water as evident by water entering the building under the door.(Work to start March 7, 2017 and completed by March 14,	{C 166}		

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{C 166}	Continued From page 1 2017) c. Courtyard 1 - The concrete slab for the Courtyard has dropped at least 1 1/2 inches in the back left corner, cracking the slab. (Work to start March 7, 2017 and completed by March 14, 2017) d. Courtyard 1 - The rain and roof runoff from the rain is funnel to this courtyard which has two small area drains that may not be capable of handling this amount of water as evident by water entering the building under the door. (Work to start March 7, 2017 and completed by March 14, 2017)	{C 166}		
{C 189}	Building Equipment Maintained Safe, Operating 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: 2. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff and visitors if they could not promptly find their way to an exit during an emergency. Findings on December 14, 2016: e. Fire/Smoke Barrier at the front side of the Activity Room - this Exit has no exit sign directing you to egress through these doors, on the Activity	{C 189}		

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{C 189}	Continued From page 2 Room Side. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke/fire barriers did not close completely and latch to restrict fire and smoke. This could affect all residents, staff and visitors by not containing the smoke of the fire in the compartment of origin. Findings on December 14, 2016: a. Fire/Smoke Barrier near Bedroom 203 - Front leaf, of the double-egress cross-corridor doors, did not latch into their frame when the fire alarm system released the doors. b. Fire/Smoke Barrier at the front side of the Activity Room - the right leaf, of the double-egress cross-corridor doors, did not latch into its frame when the fire alarm system released the doors. 5. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, staff and visitors to fire/smoke if not contained in Room or compartment of origin New Finding on March 2, 2017 aa. Basement Laundry Chute Room - the laundry chute door latch was falling off and the door will not close completely and latch, negating the fire rating of the laundry chute and door. 6. Based on Observation, the Building was not maintained in a safe condition. This could affect residents, staff and visitors by not containing smoke and fire in the room of origin. Findings on March 2, 2017: e. Old Wing Administrator Office - the corridor door had a hole through the door. (Door Ordered)	{C 189}		

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