STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL063011	A. BUILDING: **01** B. WING _____	R **07/12/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TARA PLANTATION OF CARTHAGE	**820 S. MCNEILL STREET CARTHAGE, NC 28327**

(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 Suzanna Fay conducted on July 12, 2017. There are deficiencies from the Biennial Follow Up Construction Survey that remain to be corrected.	{C 000}		
{C 101}	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Based on observation, the facility did not meet Code requirements in effect at the time of construction or renovation. Findings on July 12, 2017: a. A schematic plan of the special locking system was not posted at the fire alarm panel. Interview with Staff revealed that they were not clear on	{C 101}		

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{C 101}	Continued From page 1 what needed to be provided. Provide a map/floor plan indicating the doors that are locked, the location of the 'master' release switch(es), the location of the power supply and the location of the electric panel and circuit powering the system.	{C 101}		
{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. This Rule is not met as evidenced by: 1. Based on observations, the facility failed to keep the floors clean and in good repair. Findings on May 4, 2017: a. The carpet in the main lobby, living areas and down through the corridors was frayed and worn. b. There were large discolored stains down the length of the end hall in A Hall. c. A 5" triangular section of the insert carpet was torn out at the front living area. d. The carpet under the water coolers was heavily stained. e. There was a pattern of stains and worn carpet in the corridors and common area of the SCU. Interview with Staff revealed that the Owners have obtained quotes to replace the flooring. They are working on finance options for the work	{C 164}		

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{C 164}	Continued From page 2 at this time.	{C 164}		