

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL058010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED C 10/03/2017
NAME OF PROVIDER OR SUPPLIER VINTAGE INN RETIREMENT COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP CODE 826 EAST BOULEVARD HWY 17 N BYPASS WILLIAMSTON, NC 27892		
(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 Construction Section Complaint Survey by Ed Miller and Billy Bryant conducted on October 3, 2017. The Complaint alleged that the facility has had problems with bed bugs "off and on for years." Records indicate this facility was first licensed on 09/25/2017. The facility is currently licensed for 122 Beds including a 50 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1978 (Revision 10) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1987 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. The complaint was substantiated. Deficiencies were cited that require a Plan of Correction.	C 000		
C 110	Construction-Meet Sanitary Requirements SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION (e) The sanitation, water supply, sewage disposal and dietary facilities shall comply with the rules of the North Carolina Division of Environmental Health, which are incorporated by reference, including all subsequent amendments. The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", 15A NCAC 18A .1300 are available for inspection at the	C 110		

Division of Health Service Regulation

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

TITLE

(X6) DATE

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL058010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED C 10/03/2017
NAME OF PROVIDER OR SUPPLIER VINTAGE INN RETIREMENT COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP CODE 826 EAST BOULEVARD HWY 17 N BYPASS WILLIAMSTON, NC 27892		
(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 110	Continued From page 1 Department of Environment and Natural Resources, Division of Environmental Health, 2728 Capital Boulevard, Raleigh, North Carolina. Copies may be obtained from Environmental Health Services Section, 1632 Mail Service Center, Raleigh, North Carolina 27699-1632 at no cost. This Rule is not met as evidenced by: Based on observation, interview with Administrator and review of available records, the facility was not in compliance with The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions". Specifically 15A NCAC 18A .1317 (a) [which requires that] Effective measures shall be taken to keep... vermin out of and to prevent their breeding and presence on the premises. The facility does not have effective measures to prevent bed bugs from breeding and being present on the premises. Findings on October 3, 2017: a. Direct observation of bedrooms 17, 19, 20 & 21 revealed a shed husk of a bed bug in bedroom 17. b. Review of available Pest Management Company (PMC) service tickets dated 12/13/2016, 02/01/2017, 03/01/2017, 06/22/2017, 07/31/2017, 08/31/2017, and 09/27/2017 indicated there were 10 rooms where live bed bug activity has been identified and treated between 12/13/2016 and the date of survey. The following rooms have been treated for bed bugs: 1, 12, 14, 16, 17, 19, 20, 21, 25, & 34.	C 110		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL058010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED C 10/03/2017
NAME OF PROVIDER OR SUPPLIER VINTAGE INN RETIREMENT COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP CODE 826 EAST BOULEVARD HWY 17 N BYPASS WILLIAMSTON, NC 27892		
(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 110	Continued From page 2 c. The in-house protocol is initiated if staff sees bed bugs, residents have bites, and/or if the pest management company finds and treats for bed bugs. Interview with Administrator and review of "Housekeeping Cleaning Procedures of Bed Bugs" with monthly tracking chart indicated the following rooms have been treated for bed bugs infestation using the in-house protocol. The in-house protocol includes 14-day treatment using a solution of vinegar and warm water. On 7/31/2017, the pest control company records recommend using ½ ounce of Dawn per quart of water to clean room daily. The Administrator was not sure when they actually made that change. i. December 2016, Rooms 1, 12, 16, 19, 20, & 21. ii. January 2017, Rooms, 1, & 14. iii. February 2017, Rooms, 12, 20, 21, & 28A. iv. March 2017, 14, 15, 17, 20, 21B, 33, & 34. v. April 2017, 15A, 20, & 21. vi. May 2017, 16, & 21. vii. June 2017, 14B, 16A, 20, & 21. viii. July 2017, 2, 14B, 16A, 17, 20, 21, & 34. ix. August 2017, 1, 12, 14, 20, 21, & 34. x. September 2017, 1, 14, 15, 17, 19, 20, 21, 25A, 26A, & 34. xi. October 2017, 14, 15, 17, 19, 20, 21B, 25A, 26A, 27, & 34 e. Based on interview with Administrator - the box springs in infected rooms have been wrapped with plastic sheeting and taped shut. There was no information provide about how the plastic sheeting fits into their bed bug protocol. On 07/31/2017 staff notified the PMC that they were going to wrap all box springs. f. The Administrator said they have a contract	C 110		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL058010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED C 10/03/2017
NAME OF PROVIDER OR SUPPLIER VINTAGE INN RETIREMENT COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP CODE 826 EAST BOULEVARD HWY 17 N BYPASS WILLIAMSTON, NC 27892		
(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 110	Continued From page 3 with a PMC to treat for bed bug but did not have a copy. She did not know the date the contract started or the scope of the contract.	C 110		
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: Based on Observation, the facility failed to keep walls, ceilings, floors or floor coverings and furniture clean and in good repair. Findings on October 25, 2017: The facility is not effectively erasing signs of bed bug activity to make it easier to identify where live bed bugs are so that treatment can be focused where it is needed. a. Direct observation of Resident rooms on 10/03/2017 revealed a shed husk of a bed bug in bedroom 17. Administrator indicated that housekeeping was in the process of cleaning this room. Housekeeping is waiting for the sprayed on "Dawn" to dry before vacuuming. b. Direct observation of Resident rooms on 10/03/2017 revealed Bedroom 17, 19, 20 & 21 have carpet on the floor and the perimeter of the room had dust, grans of dirt/sand, or crumbs between the carpet and the wall base.	C 164		