STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL026017	A. BUILDING: **01** B. WING _____	R **02/01/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CAROLINA INN AT VILLAGE GREEN	**400 FORSYTHE STREET FAYETTEVILLE, NC 28303**

(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 Biennial Follow Up Construction Survey report by Frank Strickland on 02/01/2018: Cited deficiencies have been field verified for correction. However, there is an outstanding deficiency that requires corrective action. A new POC is required to be submitted to DHSR-Construction.	{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: 2- Based on observation, the facility failed to meet the Code requirements in effect at the time of construction or alterations as relates to the Code requirements for corridor doors to be positive latching. Note: In sprinklered buildings, spaces equipped with a complete smoke detection system could be	{C 101}		

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{C 101}	Continued From page 1 open to the corridor and doors installed in separating walls would not be required to have positive latching. Findings on 02/01/2018: (a) 3rd FL Bistro - the two pair of corridor doors are equipped with roller latches and the room does not have smoke detection. (b) 1st FL Dining - the corridor doors are equipped with roller latches and the room does not have smoke detection.	{C 101}		