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 **11/29/2018**

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 report by Frank Strickland on 11/29/2018: There are previous deficiencies cited from the Biennial Construction Survey that require corrective action and a new Plan of Correction is required.	{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- Observations revealed that the facility does not meet the licensure and code requirements in effect at the time of construction or alteration Findings on 11/29/2018: (a) This facility was designed to have a 1 hour ceiling assembly and all ceiling tiles should meet the requirements of that rating. Throughout the	{C 101}		

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{C 101}	Continued From page 1 facility, locations were observered where fire rated ceiling tiles have been replace with non-fire-rated tiles. Review of UL labeling for the stock ceiling tile at the facility indicated that the replacement ceiling tile do not meet the UL requirements for a fire resistant ceiling. . (b) The 2x4 light fixtures along the 200 Hall, and the 300 and 400 Halls did not have 'boxing' around the fixtures to prevent the spread of fire or smoke at the light fixtures. Note: A letter from the local Authority Having Jurisdiction dated 10/07/2002 permitted existing unprotected mechanical penetrationss which were not modified from original installation to remain. However, renovations to the mechanical ductwork would be required to be performed under permits and modified penetrations in rated assemblies to be protected as required.	{C 101}		