STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL090025	A. BUILDING: 01 B. WING _____	01/16/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODRIDGE ASSISTED LIVING FACILITY	2515 FOWLER SECREST ROAD MONROE, NC 28110

(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 Biennial Survey by Ed Miller and Dennis Harrell, conducted on January 16, 2019. Records indicate this facility was first licensed on 1-27-1999, as a Home for the Aged for 80 beds, including 24 Special Care Beds. Based on this information, we are requiring the facility to meet the 1996 Homes for the Aged and Disabled - Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 Edition of the North Carolina State Building Code, Section 409.1, Institutional Occupancy Group I Deficiencies were cited that require a Plan of Correction.	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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all of the required procedures to properly operated doors equipped with Special Locking Arrangements. This could affect all occupants who would need to evacuate through the door(s). Findings on January 16, 2019: a. AL Side - many staff interviewed, did not know about the use and location of the central on/off emergency release switches. b. SCU Med Room - the central on/off emergency release switch for the special locking system is located in the Med Room. Only the Med Tech has the key to this room. The NC State Building Code requires the central on/off emergency release switch to be accessible to all staff responsible for evacuation. The central on/off emergency release switch should be located to a readily accessible location. c. Offices Suite - the central on/off emergency release switch for the special locking system is located in this area and the suite door is locked after normal working hours. Most staff do not have access to this room. The NC State Building Code requires the central on/off emergency release switch to be accessible to all staff responsible for evacuation. The central on/off emergency release switch should be located to a readily accessible location.	C 101	C101 1.A Staff formal Education Prior to staff inservice, SIC/Med Techs have been instructed on the emergency release switches to talk with staff on each shift. 2.6.2019 C101 1.B Kill switch move to outside of Med room with protective box around it by Modern Systems. C101 1.C Kill switch moved to outside of Nurses Station where it is assessible to all staff. Quick release protective box covers it and installed by Modern Systems. Supervisor/Med Tech notified and showing staff prior to formal training on 2.21.2019.	2.21.2019 2.6.2019 2.6.2019
C 154	Entrances/Exits-Wanderer Alarms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL	C 154		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODRIDGE ASSISTED LIVING FACILITY	2515 FOWLER SECREST ROAD MONROE, NC 28110

(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 154	Continued From page 2 ENVIRONMENT (h) The requirements for outside entrances and exits are: (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide exit doors that are accessible by residents equipped with sounding devices that activated when the door opens. Findings on January 16, 2019: a. Exit near Bedroom 339 - this "Special Locking System" exit has an intermittently working alarmed protective cover over the emergency release switch. This allows residents unrestricted access to the switch that unlocks that exit. In addition, the exit had no other notification device.	C 154	C154 1.a. Exit door near 339 was realigned and hinges replaced. Door opens freely and new batteries in alarm device.	1.24.2019
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;	C 166		

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C 166	Continued From page 3 (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, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on January 16, 2019: a. Bedroom 218 - a portable medical oxygen cylinder is laying on its side, on top of a rack of portable medical oxygen cylinder, not physically secured. b. Bedroom 325 - a portable medical oxygen cylinder is laying on its side, on top of a rack of portable medical oxygen cylinder, not physically secured.	C 166	C166 1.a. Bedroom 218...Portable medical oxygen cylinder will be placed in and secured in the rack for oxygen cylinders when not in use by resident. Staff will monitor for compliance C166 1.b. Bedroom 325...Portable medical oxygen cylinders will be placed in and secured in the rack for oxygen cylinders when not in use by resident. Staff will monitor for compliance.	
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on January 16, 2019: a. Activity/Dining - the electrical power receptacle found within six feet of the sink did not provide ground fault protection.	C 188	C188 1.a Boswell Electric installed new GF1 receptacle.	

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODRIDGE ASSISTED LIVING FACILITY	2515 FOWLER SECREST ROAD MONROE, NC 28110

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C 188	Continued From page 4 b. Employee Lounge - the electrical power receptacle found within six feet of the sink did not provide ground fault protection.	C 188	C188 1.b. Boswell Electric installed new GF1 receptacle in the Employee Lounge.	1.18.2019
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: 1. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on January 16, 2019: a. Front Door - the exit sign did not illuminate on backup power when tested. Exit signs must work on backup power to provide directions during power outages.	C 189	C189 1.a. Boswell Electric installed new exit sign at front door	1.18.2019
	b. Smoke Barrier - there is no exit sign to direct you through the smoke doors on the Activity side.		C189 1.b. Boswell Electric installed Exit sign directing you through the smoke doors.	1.18.2019
	2. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on January 16, 2019: a. Laundry -two dryer duct's escutcheons plates have drop creating a gap that is not firestopped		C189 2.a. S. Robinson & J. Helms raised ducts up to ceiling	1.18.2018

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C 189	Continued From page 5 as they penetrate the fire-resistance-rated ceiling assembly. b. Electrical Room - there are gaps around three cable bundles not completely firestopped as they penetrate the fire-resistance-rated ceiling assembly. c. Office Group across from General Bathroom Middle Office - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. d. External Electrical Room - there is a hole with cable firestopped with drywall tape as it penetrates the fire-resistance-rated ceiling assembly. Drywall tape over a hole is not approved to firestop this type of penetration. 3. Based on observation, the Building was not maintained in a safe and operating condition, because staff using the commercial kitchen range and hood fire suppression system are not attentive to the daily maintenance required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on January 16, 2019: a. Kitchen - the commercial kitchen hood's suppression system does not have the nozzles correctly aimed at the cook top because of a shelf above the cook top. This shelf blocks about 50 percent of the nozzles spray. Deficiency corrected before Construction Surveyors departed site. 4. Based on Observation, fire rated doors of hazardous or Incidental areas are not being maintained in a safe and operating condition. By not maintaining the fire and smoke resistance of doors, keeping rooms the NC State Building Code defines as "Hazardous or Incidental Area" separated from the rest of the Building. This	C 189	C189 2.b. 3 M Fire Stopper caulking used to seal the three cable bundles that penetrate the fire-resistant-rated ceiling assembly. C189 2 c Used 3M Fire Stopper caulking to caulk small hole C189 2 d Used 3M Fire Stopper caulking to seal hole and remove old drywall tape to make clean seal C189 3 a Educated kitchen staff that stove must be pushed back into place and remain Dietary Director will assure compliance. Deficiency corrected before Construction Surveyors departed site.	1.18.2019 1.18.2019 1.18.2019 1.16.2019

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C 189	Continued From page 6 could affect residents, staff and visitors if smoke/fire is not contained in Room of origin. Findings on January 16, 2019: a. Maintenance Office/Storage - the corridor door (45 min rated, self-closing) did not latch into its frame, on its own power. 5. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the room of origin. Findings on January 16, 2019: a. Records/Storage - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. b. Bedroom 220 Bathroom - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. 6. Based on observation, the Building was not maintained in a safe and operating condition, by failing to ensure that egress from all areas can be done without the use of special effort. This could affect some staff and visitors if someone becomes trapped inside. Findings on January 16, 2019: a. Exit near Bedroom 339 - the back leaf of the pair of exterior doors is difficult to open taking extra force to open. 7. Based on observation, the Building was not maintained in a safe and operating condition, because some corridor doors did not resist the passage of smoke due to holes in the leaf of the doors. This could affect all residents, staff and visitors if the doors did not contain smoke/fire in	C 189	C189 4 a. Install new hinges on Maintenance/Storage corridor door to allow for closing on own power. C189 5.a. FLSA (Fire & Life Safety America, Inc) raised head of sprinkler to ceiling C189 5 b FLSA repaired ceiling and raised sprinkler head up and flush with ceiling C189 6.a. New hinges installed, re-aligned door and new batteries in squeeler box.	1.18.2019 1.25.2019 1.25 2019 1 24 2019

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WOODRIDGE ASSISTED LIVING FACILITY	2515 FOWLER SECREST ROAD MONROE, NC 28110

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C 189	Continued From page 7 the room of origin. Findings on January 16, 2019: a. SCU Central Bath - there is a 3/8 inch diameter hole through the corridor door around the door handle. b. General Bathroom - the corridor door has a zero to 1/8 inch gap between the top of the door and the bottom of the doorframe's stop. In addition, there is a 1/8 inch gap between the strike jamb doorstop and the swinging edge of the door. c. Bedroom 222 - the corridor door has a 1/8 inch gap between the strike jamb doorstop and the swinging edge of the door. d. TV-Room - the bolt in the chain bolt on the inactive leaf is install backward. When the bolt hit the receptor hardware, it does not slide down to latch in to its frame. When the inactive leaf does not latch then the active has nothing to latch into, thus the doors cannot be smoke tight. Deficiency corrected before Construction Surveyors departed site. e. Bedroom 325 - the corridor door does not latch into its frame when closed. f. Bedroom 322 - the corridor door has a 1/8 inch gap between the strike jamb doorstop and the swinging edge of the door. 8. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on January 16, 2019: a. Bedroom 220 - the corridor door has a trashcan holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch.	C 189	C189 7.a. S.Robinson caulked hole while surveyors were in building. C189 7.b. Used quarter round to seal door and caulked entire perimeter of door. C189 7.c. Used quarter round to seal door. C189 7.d. Repaired while surveyors were on site. C189 7.e. Put longer screws in door hinges to enable door to now close freely. C189 7.f. Used quarter round to seal door and caulked crack. C189 8.a. Spoke with resident and removed trash can and now door closes and latches on its own.	1.16.2019 1.18.2019 1.18.2019 1.16.2019 1.18.2019 1.18.2019 1.16.2019

Fw: Invoice #3603 from The Boswell Group

Johnny Helms

Fri 1/25/2019 11:26 AM

Sent Items

To:Donna Hill <dhill@depaul.org>;

1 attachments (58 KB)

Inv_3603_from_The_Boswell_Group_5996.pdf;

donna this work is complete and needs to be send in for payment.

From: bethstegall@theboswellgroup.com <bethstegall@theboswellgroup.com>
Sent: Friday, January 25, 2019 8:59 AM
To: Johnny Helms
Cc: dkittrell@depaul.org
Subject: Invoice #3603 from The Boswell Group

The Boswell Group

Invoice *Due:02/24/2019*
3603

Amount Due: $868.22

Dear Johnny Helms:

Your invoice #3603 for $868.22 is attached.

Thank you for your business - we appreciate it very much.

Sincerely,

Beth Stegall
The Boswell Group
PO Box 3020
Monroe, NC 28111-3020
O: 704.289.8986
F: 704.289.5130

MODERN SYSTEMS INC.

1111 Old Stage Road • Phone: (336) 463-5205
Yadkinville, NC 27055 Fax: (336) 463-5220

WORK ORDER
11040

BILL TO:

JOB SITE:
Woodridge

Contact:

Phone #:

Panel:

WORK ORDERED:
More 2 mag Lock master Kill Switches, Replace outside Camera, install 2 new Cameras

SERVICES RENDERED:
The mag Lock Kill Switch in memory Care I removed from original Spot and installed Low Voltage ring with Blank Cover also Putty Pads (fire rated) to Seal old hole. Cut new hole on opposite Side of wall. The mag Lock Kill Switch in nurses station at Lobby Removed and Blanked off old Spot installed new Switch outside of nurses Station at door. Replaced old Camera outside with new one that was functional used existing wires installed 2 new cameras at three way intersection in Lobby, one was trained on memory Care door, the other down opposite wall at med Carts

Materials Used:

Part #	Qty.	Description
	14ft	16-2
	31 ft	Cat-5
	1	Low voltage ring
	2	Blank Cover
	1	Rated Putty Pad

Qty.	Description
1	OE-BVR800fw
2	OE-HDD2MP28
2	OE-PS12VAC
4	OE-DCP2TBLOP
	OE-VBPTAILHD

Tech.	Date	Start	Stop	Hours	
Scott	2-7-19			3hr 45mins	Ride time
				8hr 30mins	WO# 11040
Luke	2-6-19			2hr	ride tim
				6hr 15mins	WO# 11040

Scott Woak 2-7-19
TECHNICIAN SIGNATURE DATE

Johnny Helms 2-7-19
CUSTOMER SIGNATURE DATE

Johnny Helms
PRINT NAME

Service Report

WORK ORDER

Service Report Order Number	00036271
Service Territory Address	812 Biscayne Drive Concord, North Carolina 28027

Account & Contact Information

Account	DEPAUL WOODRIDGE	Phone	336-463-5205
Address	2515 FOWLER SECREST ROAD Monroe, North Carolina 28110 United States	Billing Address	ATTN: ACCOUNTS PAYABLE, 1931 BUFFALO ROAD Rochester, New York 14624 United States
Phone			
Contact			

Description of Service

Description

Work Order Details

Work Type	Service Call – Sprinkler	Work Order Number	00036271
Problem Type	SERVICE - SPRINKLER	Reference Work Order Number	
Status	Completed	Customer PO Number	
Start Date	1/22/2019 3:07 PM	Job Number	19-P-D9999
Prepared By:		Created Date	1/22/2019 3:07 PM

Work Order Line Items

Product	Description	Bill Quantity
Travel Hours		1.00
Travel Hours		1.00
Sprinkler - Standard Hours - Trainee		3.00
Sprinkler - Standard Hours - Tech		3.00

The following parts and material were included above as part of this work order's line item detail. They are broken out in this section for quick reference.

Notes

1/25/2019 SA-17248 Cody Walden: Adjusted the escutcheon plates and hangers on two sprinkler heads that where hanging down. Bathroom closet in room 220 and in the records storage room.

Customer Signature

Signature

WORK ORDER

Service Report Order Number	00036271
Service Territory Address	812 Biscayne Drive Concord, North Carolina 28027

Signed By	Johnny helms
Date	1/25/2019 1:53 PM

Limitation of Liability: FLSA liability to the Customer shall extend only to personal injury, death, or property damage arising from performance under this Agreement and shall be limited to the payments made to FLSA under this Agreement. Customer shall hold FLSA harmless from any and all third party claims for personal injury, death
or property damage arising from Customer's failure to maintain its premises, including but not limited to the damages to the fire protection system or Customer's property caused by water leakage, freezing pipes, loss of power, acts of God or other similar causes beyond the control of FLSA. In no event shall FLSA be liable for any special, indirect, incidental, consequential or any other damages of any character, including but not limited to the loss of use of the Customer's property, lost profits or lost production, whether claimed by Customer or by any third party, irrespective of whether claims or actions for such damages are based upon contract, warranty, negligence, tort, strict liability or otherwise.

DISCLAIMER OF WARRANTIES: FLSA HEREBY DISCLAIMS ANY AND ALL WARRANTIES NOT EXPRESSLY STATED HEREIN, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. UNDER NO CIRCUMSTANCES AND IN NO EVENT SHALL FLSA BE LIABLE FOR ANY SPECIAL, INDIRECT OR CONSEQUENTIAL DAMAGES OR LOST PROFITS INCURRED BY CUSTOMER, WHETHER OR NOT FLSA RECEIVES NOTICE OF THE POTENTIAL FOR SUCH DAMAGES. NOTWITHSTANIDNG THE FOREGOING, ANY LIABILITY INCURRED BY FLSA SHALL BE LIMITED TO THE AMOUNT OF GOODS AND SERVICES PURCHASE BY CUSTOMER AND CONTAINED WITHIN THIS AGREEMENT.

THE FOLLOWING TERMS AND CONDITIONS ARE AN INTEGRAL PART OF THIS WORK ORDER. CLIENT ACKNOWLEDGES RECEIPT OF A COPY OF THIS WORK ORER AND HAS READ THIS WORK ORDER.

1. This Service Authorization Agreement (the "Agreement") between the Customer and Fire Life Safety America, Inc. ("FLSA") represents the contract between the parties for the work or services described above (the "Work"). Customer agrees to pay for the Work requested by and performed for Customer as authorized by the Agreement.

2. Payment for the Work is due upon receipt of invoice. If any payment is not timely received by FLSA, Customer agrees to pay late charges and such late charges shall accrue at the rate of 1.5% per month (18% per annum) or the highest rate allowed by applicable law, whichever is lower, from the date payment was due and will be added as principal to all unpaid balances. Interest shall continue to accrue on any unpaid balances until paid in full.

3. By accepting these Terms and Conditions, Customer agrees that it shall pay all costs and expenses including, but not limited to, reasonable attorneys' fees, plus
court costs incurred by FLSA in the collection of any sum payable by Customer to FLSA or its exercise of any enforcement or collection remedies.

4. This Agreement and all transactions between FLSA and the Customer shall be governed and construed in all aspects in accordance with the laws of the Commonwealth of Virginia. Any legal action, dispute, or proceeding arising from or in connection with this Work Order for collection of any sums payable to FLSA shall be brought and maintained exclusively in the federal or state courts of the Commonwealth of Virginia, and Customer hereby consents to such personal jurisdiction within the Commonwealth of Virginia. The courts within the County of Henrico, Virginia, shall be the proper forum and preferred venue for any such legal action or proceedings that arise hereunder.

5. Should the Work be delayed for any reason that is not the fault of or caused by FLSA, then FLSA reserves the right to collect additional compensation and/or any proven damages for delay in addition to receiving extensions of time for performance hereunder. FLSA shall receive payment for any additional labor, materials, supplies
or other expense that may arise due to any change, amendment, modification or alteration authorized by Customer or its agents that materially alters and/or modifies the description or scope of the FLSA contemplated hereby.

6. Any modification to this Agreement must be made in writing and signed by both FLSA and Customer.

7. Terms and conditions not consistent with those stated herein that may appear on Customer's formal purchase orders or contracts shall not be binding upon FLSA
unless specifically agreed to in writing by FLSA.

8. Any and all claims, disputes, and matters arising out of or relating to this Agreement shall be governed by the law of the Commonwealth of Virginia and shall be resolved as follows: Any and all disputes between FLSA and Customer shall be resolved, at FLSA's option, (i) in the Circuit Court of Henrico County, Virginia, or such other venue as may be mutually agreed upon, FLSA and Customer hereby waiving their right to demand a jury trial, and (ii) by arbitration in accordance with the rules of the American Arbitration Association. In the event FLSA substantially prevails in such litigation or arbitration, Customer shall pay FLSA's reasonable attorney's fees incurred.
By signing, the Customer hereby authorizes FLSA to perform the Work described above and certifies that: (i) the information provided above and/or attached to this Agreement is true, accurate, and complete to the best of the Customer's knowledge (ii) the signor has the authority to authorize the Work requested pursuant to this Agreement; and (iii) the Customer has read this entire Agreement and agrees to comply with and be bound by the terms and conditions contained herein.

DHSR-Woodridge Assisted Living Facility

Byrd, Felicia A <felicia.byrd@dhhs.nc.gov>

Tue 2/5/2019 10:47 AM

To:Janis Walker <jcarroll@depaul.org>;

2 attachments (191 KB)

20190205-Woodridge Assisted Living Letter.pdf; 20190205-Woodridge Assisted Living SOD.pdf;

Attached is the Statement of Deficiencies and letter for the **DHSR-Construction Section Biennial Survey** conducted on 01/16/2019 by Ed Miller.

Please sign and date the Plan of Correction. The Plan of Correction can be:

Mail to: DHSR Construction Section
2705 Mail Service Center
Raleigh NC 27699-2705

Fax to: (919)-733-6592

Email to: DHSR.Construction.Admin@dhhs.nc.gov

Thank you

Felicia A. Byrd
Administrative Specialist I
Division of Health Service Regulation, Construction Section
NC Department of Health and Human Services

Office: 919-855-3991
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