STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL098006	A. BUILDING: **01** B. WING _____	R **10/16/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING ARBOR OF WILSON	**2045 WARD BOULEVARD, NW** **WILSON, NC 27893**

(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 October 16, 2019. There are deficiencies cited in the Biennial 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. Observations revealed that the facility was not in compliance with NCSBC requirements in effect at the time of construction, addition or renovation. Facilities with special locking in place require a wiring diagram and system components location map provided under glass adjacent to the fire alarm panel. Findings on October 16, 2019:	{C 101}		

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{C 101}	Continued From page 1 a. The components map located by the fire alarm panel did not indicate the special locking components. These will be provided by the fire alarm vendor and have not yet been received. b. There was not a wiring diagram provided. These will be provided by the fire alarm vendor and have not yet been received.	{C 101}		
{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: 3. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Findings on October 16, 2019: b. Kitchen - the exhaust fan in the Janitor's closet has a heavy accumulation of grease and dirt. The fan grille does not appear to have been cleaned. 6. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have holes through the door nor gaps between the door and the door frame stops.	{C 189}		

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{C 189}	Continued From page 2 Findings on October 16, 2019: a. 200 Hall Living Room - there are small 3/8" diameter holes above and below the door hardware. Facility staff indicated this item was thought to be corrected and will be taken care of immediately.	{C 189}		