Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034003	A. BUILDING: 01 B. WING _____	10/25/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VERRA SPRINGS AT HERITAGE WOODS	3812 FORESTGATES DRIVE WINSTON SALEM, NC 27103

(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 Tod Hancock, conducted on October 25, 2023. Records indicate this facility was first licensed on August 15, 1988, for 29 residents. Therefore, the facility must meet the 1987 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes and the 1978 North Carolina State Building Code (Revision 8), Section 409-Institutional Occupancy (Group I) Note: This facility is licensed for 29 beds, which are all located on the Ground Floor, while floors 1, 2, and 3 are occupied by Independent Living beds. Deficiencies were cited that require a Plan of Correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review and interview with staff, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this rule. Findings October 25, 2023: a. There were no records available to indicate the Fire Alarm system had been inspected. b. There were no records available to indicate that Fire Drills had been conducted.	C 111	C111(A)- Fire Alarm inspected on 11/16/2023. No Deficiencies found- Please note change In Maintenance Director. New Maintenance Director was unable to find previous inspection(s). Log established for all documentation under new Maintenance Director and will be kept up to date. C111 (B) Fire Drills conducted on 10/26/2023, 11/16/2023 and 12/22/2023. Fire Drills to be conducted monthly and New Maintenance Director to maintain logs readily available for inspections.	11/16/2023 10/26/2023

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE: Executive Director

(X6) DATE: 12/22/23

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034003	A. BUILDING: 01 B. WING _____	10/25/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VERRA SPRINGS AT HERITAGE WOODS	3812 FORESTGATE DRIVE WINSTON SALEM, NC 27103

(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 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 is not maintaining the electrical components located near water a water source in a safe manner. Findings on October 25, 2023: a. Residence Laundry- The receptacle behind the washing machine did not trip on test indicating the lack of ground fault protection.	C 188	A. Resident Laundry- Licensed Electrician added GFI (2) protection on 12/20/2023. Please note this building is over 33 years old and was not cited previously for lack of GFI- However it is corrected now.	12/20/2023
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 there is a failure to maintain the fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings October 25, 2023: a.Sprinkler Room- There is an opening in the	C 189	1. A- Sprinkler Room- Maintenance Director corrected opening(s) with sheet rock and fire caulking	12/21/2023

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034003	A. BUILDING: 01 B. WING _____	10/25/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VERRA SPRINGS AT HERITAGE WOODS	3812 FORESTGATES DRIVE WINSTON SALEM, NC 27103

(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 189	Continued From page 2 ceiling. b.Electrical Room-There are multiple openings in the ceiling. 2. Based on observation, the smoke-tight corridor doors are not maintained in a safe and operating condition. Findings October 25, 2023: a. Room 026- The door does not fit tight into the jamb. b. Stairwell Door at Fitness Room- The stairwell door does not fit tight into the jamb.	C 189	1.B Electrical Room- All openings fire caulked by Maintenance Director. 2. A – Room 26 Door hinges were repaired and tightened to fit on 11/7/2023 by Maintenance Director. 2. B Stairwell Door was sanded to fit correctly and door hinges were tightened by Maintenance Director	12/21/2023 11/7/2023 11/7/2023