NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

April 2, 2024
Patrick Ogbonna, Administrator (via email only)
606 East Morris Avenue
Benson, NC 27504

RE: The Villas Benson I – FC Follow-up Biennial Construction Survey
606 East Morris Avenue
Benson (Johnston County)
FID #941212

Dear Mr. Ogbonna:

On **March 14, 2024**, a Biennial Follow-up Construction Survey was conducted at your facility by the Construction Section of the Division of Health Service Regulation to determine if your facility was in compliance. As a result of this survey, your facility is not in substantial compliance due to uncorrected deficiencies. Failure to correct the outstanding deficiencies may jeopardize the status of your license. Corrections are required and a **Signed Plan of Correction** must be submitted.

Plan of Correction (POC)

A POC for the deficiencies must be submitted April 17, 2024.

Your POC for the deficiencies must contain the following:

- What corrective action(s) will be accomplished by the facility to correct the deficient practice;
- How you will identify other life safety issues having the potential to affect residents by the same deficient practice and what corrective action will be taken;
- What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and,
- How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place.

- Include dates when corrective action will be completed. The corrective action dates must be acceptable to the State. Any completion date greater than **15** days from date of survey requires a written waiver from DHSR – Construction Section.

    - Corrective action must begin immediately.

Your Signed Plan of Correction can be:

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

Faxed to: (919) 733-6592

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

If you have any questions concerning the instructions contained in this letter, please contact me.

Sincerely,

Scott Greenwood

Scott Greenwood
Architectural/Engineering Technician
DHSR – Construction Section

cc: DHSR – Adult Care Licensure Section
City Building Inspection Department – with attachment (via email only)
Johnston County DSS – with attachment (via email only)

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
	FCL051056	A. BUILDING: 01 B. WING	R 03/14/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE VILLAS BENSON I	606 EAST MORRIS AVENUE BENSON, NC 27504

(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 by Scott Greenwood DHSR Construction Section conducted a Biennial Follow Up Survey on March 14, 2024 from 9:20 AM to 9:45 AM. At the time of the follow up survey not all of the previously cited deficiencies have been corrected. . Therefore further action is required. The cited deficiencies are as follows;	(C 000)		
(C 174)	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that there was lint buildup and debris behind the clothes dryer. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 2. At the time of the survey it was observed that the toilet paper holder was missing in bathroom #1. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 3. At the time of the survey it was observed that	(C 174)	Reference Section 0300 The Building 10A NCAC 13G.0317 Building Service Equipment 1. The lint buildup and debries has since been removed and completely cleaned out. The RCC will henceforth inspect the area monthly to ensure that there are no further buildup. 2. The missing toilet paper holder in bathroom #1 has been replaced and is now functional. The RCC will monthly check all restrooms to ensure compliance	3/16/24 3/16/24

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Administrator 4/16/24

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{C 174}	Continued From page 1 there was peeling ceiling paint at the attic access panel in the dining room. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 4. At the time of the survey it was observed that the exterior clothes dryer vent was damaged. This is not compliant with the rule. Take the necessary steps to correct this deficiency.	{C 174}	3. The peeling ceiling paint at the attic access panel in the dining room, has been repaired and painted. 4. The damaged exterior clothes dryer vent has been replaced and is fully functional.	3/16/24 3/16/24