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
	HAL096051	A. BUILDING: **01** B. WING _____	**04/25/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EAGLE'S POINTE	**901 WEST NEW HOPE ROAD GOLDSBORO, NC 27534**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on April 25, 2024. This facility was licensed on December 21, 2016 and is currently licensed for 104 Beds. Therefore, this facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 2012 Edition of the North Carolina Building Code, Institutional Occupancy. Deficiencies have been cited and a Plan of Correction is required.	C 000	Responses to sited deficiencies does not constitute an admission or agreement by the facility of the truth of alleged or conclusions set forth in this statement of Deficiencies of Corrective Action Report; the plan is solely as a matter of compliance with state law.	
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. Review of records revealed that the facility did not have current sanitation reports maintained in the home. Findings on April 25, 2024: a. The most current Building Sanitation Inspection report is dated September 13, 2022.	C 111	Current Sanitation & Fire Safety Reports Building Sanitation Inspection has been requested and will be completed by 6-7-2024	6-7-2024
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS	C 164		

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

Kristen Lyon | Executive Director | 5/23/2024

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C 164	Continued From page 1 (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair. Findings on April 25, 2024: a. Kitchen - the ceiling around the sprinkler over the dishwashing area is damaged. b. AL Spa - the toilet is covered in fecal matter. c. Soiled Holding - the room is being used to dump trash. There were bags of trash and cardboard boxes piled on the floor. The floor was brown with dirt. There was a bad odor in the room and flies were flying around the garbage bags. d. Room 253, Left Bedroom - there is a 3' long yellow water stain on the ceiling. There are small brown dots or holes at the widest portion of the stain. 2. Observations revealed that the furnishings were not kept clean and in good repair. Findings on April 25, 2024: a. Room 120 Bath - the shower curtain is torn leaving a 6" strip of material hanging from the rings.	C 164	1. Housekeeping and Furnishings - Clean and in good repair a. Maintenance repaired ceiling around sprinkler over dishwasher area and will check sprinkler heads no less than monthly to ensure area is in good condition. b. & c. Another housekeeper has been added to the schedule to ensure adequate coverage for cleaning tasks are done daily and weekly. d. Maintenance repaired and painted ceiling 2. Housekeeping and Furnishings - Clean and in good repair a. Shower curtain has been replaced.	5-17-2024 6-7-2024 6-7-2024 5-17-2024
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

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C 189	Continued From page 2 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 and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be affected if the equipment failed to alert the occupants in case of a fire. Findings on April 25, 2025: a. The FACP has a supervisory alarm light on and the readout indicates it is related to the tamper switch. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on April 25, 2024: a. 100 Hall Living Room (Fish Room) - the emergency light did not illuminate on test. 3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.	C 189	Other Requirements 1. a. The Fire Alarm Vendor has been notified for repair to be completed by 6-7-2024 2. Maintenance will maintain electrical emergency/safety light equipment checks no less than monthly to ensure equipment is working properly. a. Battery replaced in 100 Hall Living Room (Fish Room) emergency light and was brought back online to ensure resident safety. 3. Maintenance will maintain electrical emergency/safety light equipment checks no less than monthly to ensure equipment is working properly.	6-7-2024 6-7-2024 5-17-2024 6-7-2024

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C 189	Continued From page 3 Findings on April 25, 2024: a. SCU - the exit sign over the door to the Service Hall did not illuminate on test. 4. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on April 25, 2024: a. 100 Hall Living Room (Fish Room) - the cover for the light switch has broken off. 5. Based on observation there is a failure to maintain the building's 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 on April 25, 2024: a. Corridor outside Theater - the escutcheon ring on the sprinkler head has dropped leaving a gap in the fire resistant rated ceiling. b. The sprinkler head outside of Room 160 is missing its escutcheon ring. c. The escutcheon ring on the sprinkler head outside of Room 186 is not seated correctly on the head. d. Riser Room - the sprinkler head near the door has shifted leaving a hole in the fire resistant rated ceiling. e. Short Back Hall - the sprinkler head at the double doors is missing its escutcheon ring. f. Sitting Area across from Room 215 - both of the escutcheon rings on the sprinkler heads have dropped. 6. Observations revealed that the plumbing equipment was not maintained in a safe and	C 189	a. Battery replaced in the exit sign over the door to the Service Hall to ensure resident safety. 4. a. The appropriate vendor has been notified and work order for repair has been placed. 5. a.-f. Maintenance will work with the appropriate vendor to ensure that all escutcheon rings are in place and fitting properly. Maintenance will continue to monitor placement and fitting of sprinkler heads and escutcheon rings no less than monthly.	5-17-2024 6-7-2024 6-7-2024 6-7-2024

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C 189	Continued From page 4 operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility. Findings on April 25, 2024: a. Room 136 Bath - the toilet is not secure to the floor and the seat is not secure to the toilet. 7. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment could not operate properly to suppress a fire. Findings on April 25, 2024: a. The sprinkler head outside of Room 164 has white paint on the head. b. There is a general pattern of exterior sprinkler heads with corroded heads and escutcheon rings. 8. 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 surface of the doors. Findings on April 25, 2024: a. Med Room - there is a 1/4" hole through the door above and below the door hardware.	C 189	6. a. Room 136 - Maintenance to secure toilet to the floor and the seat to the toilet to ensure that the resident is safe using the toilet. 7. a & b. Maintenance to work with the appropriate vendor to ensure that sprinkler head outside Room 164 and exterior sprinkler heads are in good repair and properly fitting escutcheon rings are in place. 8. a. Maintenance will repair 1/4" hole in Med Room door.	6-7-2024 6-7-2024 6-7-2024
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This	C 199		

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C 199	Continued From page 5 requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings on April 25, 2024: a. There was a pattern of fans not working in the facility.	C 199	C. 1. a. Maintenance will ensure exhaust fans are operational and will check no less than once a month to ensure they are in operational order.	6-7-2024