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
	HAL098023	A. BUILDING: 01 B. WING _____	11/21/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILSON HOUSE	1800 MARTIN LUTHER KING JR. PARKWAY WILSON, NC 27893

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on November 21, 2024. A Follow Up Construction Survey was conducted at the same time. Records indicate this facility was licensed on December 1, 1986 as a Home for the Aged. The facility is currently licensed for 136 beds with a 64 bed Special Care Unit. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1984 Homes for the Aged and Infirm Minimum Desired Standards in effect at time of initial licensure, and the 1978 Edition of the North Carolina Building Code(s), Institutional unrestrained. Deficiencies from the previous Construction Survey remain and are included in this report. New deficiencies have been cited and a Plan of Correction is required.	C 000	In response to the cited defeciencies do not constitute an admission or agreement by the facility of the truth of facts alleged or conclusions set forth in the Statement of Defeciencies or Corrective Action Report; the Plan of Correction is prepared solely as a matter of compliance with State Law.	
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on November 21, 2024:	C 160		

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C 160	Continued From page 1 a. Smoking Area - there is a large pile of cigarette butts on the ground by the sidewalk to the smoking area.	C 160	1.a. The cigarette butts have been removed from the ground by the sidewalk.	11/25/24
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (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 are not kept clean and in good repair. Findings on November 21, 2024: a. Kitchen - there is moisture getting into the slab and causing the glue to seep through the vinyl floor plank joints in front of the freezer/cooler unit. Two of the planks are missing and several others are loose and buckled. This is an ongoing deficiency from the previous survey and was previously cited under C 189 for mechanical drainage issues. b. Kitchen - the base is pulling away from the wall at the exterior door. c. Room 312 - the base at the bathroom door is loose and the sheetrock behind the base is damaged. d. Room 407 - there were soiled linens in the bedroom sink. The toilet was full of a brown liquid and there were brown stains on the base of	C 164	1.a. The floor planks have been replaced and the buckled, loose areas have been glued and intact. 1.b. The base to the kitchen exterior door has been repaired. 1.c. Sheetrock has been repaired and the base of the door has been repaired. 1.d. Soiled linens were removed and stains have been cleaned.	12/18/24 12/18/24 12/18/24 11/21/24

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C 164	Continued From page 2 the toilet. e. Room 411 - the floor is sticky and there is an unpleasant odor in the room. The toilet is full of fecal matter. f. SCU Activity - the window blinds are on the floor. g. Room 410 - the toilet is full of fecal matter and is clogged. h. 400 Hall Community Bath - the toilet is full of fecal matter. The showers not used daily have dirt and debris along the perimeter of the shower. 2. Observations revealed that the furniture was not in good repair. Findings on November 21, 2024: a. SCU Nurses Station - the laminate edge on the countertop has fallen off and the countertop laminate is chipping along the right return.	C 164	1.e. Floor was mopped and the fecal matter was removed. 1.f. Window blinds on the floor was removed and new blinds repalced. 1.g. toilet removed of fecal matter 1.h. Community bath on hall 400 has been cleaned and debris removed as well as the fecal matter in toilet. 2.a. Laminate has been replaced on countertop at SCU nurses station.	11/21/24 12/18/24 11/21/24 11/22/24 12/18/24
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 building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings or walls could	C 189		

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C 189	Continued From page 3 allow fire and smoke to spread beyond the area of origin. Findings on November 21, 2024: a. Physical Therapy Closet - the escutcheon ring is missing from the sprinkler head leaving a hole in the fire resistant rated ceiling. This citation is carried over from the previous survey. b. 300 Hall - there is an unfinished patch, approximately 12" wide by 18" deep, with gaps around the edges of the patch outside of Clean Linen. c. SCU Electrical Room near the back exit - there is one unsealed cable penetration at the corridor wall. d. 400 Hall Community Bath - there is a large hole at the sprinkler head by the water heater closet and there is a small hole at the sprinkler head by the toilet. e. SCU Housekeeping Closet near the entry - the fan is not secure in the ceiling leaving a gap in the fire resistant rated ceiling. f. Kitchen Corridor at Utility Room - a prior sprinkler leak has damaged the ceiling. There is an 8" square area of stained ceiling and the finish is flaking off. There is a crack in the ceiling near the damaged spot. The crack has an orange water stain where it is splitting open. g. Outside Mechanical Room - there is a gap in the ceiling at the sprinkler head. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be affected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on November 21, 2024:	C 189	ddddd 1.a. The escutcheon ring has been replaced to sprinkler head. 1.b. Gaps have been repaired and patched to Clean Linen 1.c. Cable has been sealed 1.d. Sealant has been placed around small hole. 1.e. FAn has been secured 1.f. The ceiling has been patched and painted. 1.g. The gap in the ceiling has been repaired	sss 12/18/24 12/18/24 12/18/24 12/18/24 12/18/24 12/18/24

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C 189	Continued From page 4 a. 300 Hall - the door hardware on the right hand door of the cross corridor doors is loose. The screws are backing out and will damage the latching hardware if not repaired. b. 100 Hall - the right hand door of the cross corridor doors did not latch when released by the fire alarm. 3. 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 gaps between the door and the door frame stops. Findings on November 21, 2024: a. 300 Hall Large Dining - there is a 1/2 inch gap at the top of the door on the strike side of the left entry door. b. Room 100 - there is a 1/2 inch gap at the top of the door between the door and the door frame. 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on November 21, 2024: a. Room 320 - the door does not latch when closed. b. Room 418 - the door does not latch when closed. c. Room 201 - the door does not latch when closed. d. Room 216 - the door does not latch when closed. 5. Based on observation the facility's fire safety	C 189	SS 2.a. repaired 12/18/24 2.b repaired 12/18/24 3.a. repaired 12/18/24 3.b. repaired 12/18/24 4.a. repaired 12/18/24 4.b.repaired 12/18/24 4.c. repaired 12/18/24 4.d. repaired 12/18/24	

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C 189	Continued From page 5 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 did not function during a fire. Findings on November 21, 2024: a. Laundry - the fire extinguisher is sitting on the floor. The bracket appears to be damaged.	C 189	5.a. The bracket has been replaced and fire extinguisher is placed properly	12/18/24
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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, it was revealed that the hot water temperature at all fixtures used by resident was not maintained between 100 and 116 degrees F. Findings on November 21, 2024: a. 100 Hall - the water temperature taken at the Community Bath sink was 125 degrees F.	C 195	1.a. Water temp has been adjusted and within normal range.	11/22/24

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C 199	Continued From page 6	C 199		
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 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 November 21, 2024: a. 300 Hall Soiled Linen - the exhaust fan is not working. b. SCU Housekeeping by the Nurses Station - the exhaust fan is not working. c. 200 Hall Community Bath - the exhaust fan is not working. d. Room 100 - the exhaust fan is not working. 2. Based on observation the facility failed to provide the required exhaust ventilation equipment in bathrooms.	C 199	1.a-d A work order has been placed and Regional Maintenance is aware, awaiting a vendor for repair.	

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C 199	Continued From page 7 Findings on November 21, 2024: a. 300 Hall Day Room Bathroom - there is no exhaust ventilation provided in this room.	C 199	2.a. A work order has been placed and Regional Maintenance is aware, awaiting a vendor for repair.	