

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/09/2025
NAME OF PROVIDER OR SUPPLIER ENO POINTE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 5600 N ROXBORO ROAD DURHAM, NC 27712		
(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 Suzanna Fay conducted on January 9, 2025. This facility was first licensed on November 28, 1984 for 147 residents. Therefore, this facility must meet the 1984 Regulations for Adult Care Homes, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1978 North Carolina State Building Code-Section 409- Institutional. Deficiencies have been cited and a Plan of Correction is required.	C 000		
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 ceilings were not kept in good repair. Findings on January 9, 2025: a. Kitchen - the ceiling over the freezer and cooler units is flaking and peeling.	C 164		
C 189	Building Equipment Maintained Safe, Operating	C 189		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 189	Continued From page 1 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 electrical equipment has not been maintained in a safe manner. Findings on January 9, 2025: a. Back New Hall Shower Room - the GFCI outlet at the sink did not have power. b. Room 228 Bathroom - the GFCI outlet at the sink did not have power. 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 doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on January 9, 2025: a. The cross corridor door by Room 108 did not latch when released by the fire alarm. The closer was adjusted at the time of survey correcting this deficiency.	C 189		