STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL059033	A. BUILDING: **01** B. WING _____	R **04/29/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOUSTON HOUSE	**9460 HWY 64** **UNION MILLS, NC 28167**

(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 Biennial Follow Up Construction Survey by Suzanna Fay conducted on April 29, 2025. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{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 the Staff in Charge, the facility failed to maintain current (completed within the last twelve months) sanitation and fire and building safety inspection reports in the home and available for review. Findings on April 29, 2025: a. There was no Fire Official (Fire Marshal) report available for review. Reports have not been completed as the facility has been empty since the hurricane in September 2024. b. There was no Building Sanitation Inspection report available for review. Reports have not been completed as the facility has been empty since the hurricane in September 2024. c. There was no "National Fire Alarm and Signaling Code", NFPA 72 report available for review. Reports have not been completed as the facility has been empty since the hurricane in September 2024.	{C 111}		

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{C 160}	Continued From page 1	{C 160}		
{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. Based on observation, the outside grounds were not maintained in a clean and safe condition. Findings on April 29, 2025: a. Front Porch - these slabs were not flush with the adjacent ground and there is not a handrail where it steps down. This creates a fall hazard.	{C 160}		
{C 175}	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas with the required individual towel bar for each resident.	{C 175}		

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{C 175}	Continued From page 2 Findings on April 29, 2025: c. Bedroom 17 - this double occupancy bedroom and adjoining bathroom was missing both of its two required individual towel bars.	{C 175}		
{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 observations, the building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in the room of origin. Findings on April 29, 2025: e. Kitchen Pantry - there was a two-inch hole not firestopped as it penetrated the fire-resistance-rated ceiling assembly. The hole appears to have been repaired but there is a new leak around the attic access hatch leaving the ceiling stained and the finish flaking. 4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on April 29, 2025:	{C 189}		

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{C 189}	Continued From page 3 b. Med Room - a multi-plug adaptor, without integral overcurrent protection, was attached to an electrical power receptacle. The room was locked and this citation could not be verified.	{C 189}		
{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. Based on observation and testing with a thin plastic sheet, the facility did not provide working exhaust ventilation. Findings on April 29, 2025: a. Med Room - the exhaust ventilation system was not working. The room could not be accessed to verify if the exhaust fan was working.	{C 199}		