

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL051065	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 05/15/2025
NAME OF PROVIDER OR SUPPLIER THE LANDINGS OF SMITHFIELD		STREET ADDRESS, CITY, STATE, ZIP CODE 200 KELLIE DRIVE SMITHFIELD, NC 27577		
(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 Follow-Up Survey by Ryan Meyer conducted on May 15, 2025. All deficiencies cited previously have not been corrected. Therefore a Plan of Correction is required.	{C 000}		
{C 101}	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Based on observation and interviews with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the components required and or procedures to comply and properly operate doors equipped with Special Locking. This could affect all occupants who need to evacuate through the doors.	{C 101}		

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

TITLE

(X6) DATE

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{C 101}	Continued From page 1 Findings on January 14, 2025: a. Fire Alarm Control Panel - the "Special Locking System" does not have an informational wiring diagram and a system components location diagram posted at the FACP including the name, location, and circuit number for the electrical panel that energizes the system. Per interview with Maintenance Director, they have contacted the installing contractor and are waiting for the Drawings.	{C 101}		
{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: 2. Based on observation, this facility has failed to maintain the fire safety components in a safe and operating condition. Findings on January 14, 2025: a. The set of fire doors going into the main entrance of the SCU has a gap larger than the allowable which is 1/8". b. The Fire Alarm Panel is indicating trouble. The panel is showing that the NAC 3 circuit is the trouble.	{C 189}		

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{C 189}	Continued From page 2 3. Based on observation the facility is not maintaining its plumbing system as necessary. Findings on May 15, 2025: a. The grease trap tank is full and the lines are backing up into the kitchen floor drains creating an odor in the front part of the facility.	{C 189}			
{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: 2. Based on observation the facility is not maintaining hot water temperatures within the range of 100 to 116 degrees Fahrenheit. Findings on January 14, 2025: a. The hot water temperature throughout the facility is approximately 80 degrees Fahrenheit.	{C 195}			
{C 199}	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT	{C 199}			

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{C 199}	Continued From page 3 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. The facility is not keeping its exhaust fan in operable condition. Findings on January 14, 2025: a. There is not a exhaust fan in the SCU spa. b. The exhaust fan in rooms 610 and 103 are not working properly.	{C 199}		