

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL063025	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/24/2025
NAME OF PROVIDER OR SUPPLIER TERRABELLA SOUTHERN PINES		STREET ADDRESS, CITY, STATE, ZIP CODE 101 BRUCEWOOD ROAD SOUTHERN PINES, NC 28387		
(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 June 24, 2025. There are deficiencies from the Biennial Construction Survey that remain to be corrected and one new deficiency has been added.	{C 000}		
{C 116}	Plans Submittals and Approvals SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure. Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division. (d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained. (e) Completed construction or remodeling shall	{C 116}		

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

TITLE

(X6) DATE

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{C 116}	Continued From page 1 conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder. (f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion. This Rule is not met as evidenced by: 1. Based on interview and record review, the facility did not submit documents and specifications to DHSR Construction Section for review and approval when construction or remodeling was planned. Findings on June 24, 2025: a. SCU BLDG - Interview with the Maintenance Director revealed the facility had replaced the call system with a new call system. Review of DHSR Construction records revealed that no plans or specifications have been submitted which are required even if replacing a like for like call system.	{C 116}		
{C 135}	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are:	{C 135}		

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{C 135}	Continued From page 2 (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that resident toilet rooms and bathrooms are not utilized for storage or purposes other than those indicated in the Rule. This deficiency affects all residents and staff who would not have the fixtures and/or space for the services needed. Findings on June 24, 2025: a. SCU BLDG D Hall, Spa - activities games and supplies were being stored in the tub. These were removed at the time of survey.	{C 135}		
{C 201}	Newly Licensed Facilities-Call System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (i) In newly licensed facilities without live-in staff, an electrically operated call system shall be provided connecting each resident bedroom and bathroom to a staff station. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed. (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: New Deficiency:	{C 201}		

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{C 201}	Continued From page 3 1. Based on Observation and interview, the electrically operated call system was not being operated in a manner that insures the safety of the residents. Findings on June 24, 2025: a. SCU BLDG - the surveyor tested one of the newly installed call bells in a spa. The alarm is directed to pagers carried by staff and to a computer monitor in the Activity Director's Office. Six staff were asked if they received the alert on their pager. None of the staff carried a pager at the time including the Med Tech. The pagers were found in the Med Room. None of the pagers had batteries and appeared to be missing the backs. Maintenance tried installing a battery in two of the pagers but could not get them to work. The computer monitor did have a low decibel alert and showed the room where the call was pulled but the alert could only be heard in the immediate area of the monitor which was in the back of the building in an office off of the Activity Room.	{C 201}		