STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL032131	A. BUILDING 01 B. WING	R 12/19/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ATRIA SOUTHPOINT WALK	5705 FAYETTEVILLE ROAD DURHAM, NC 27713

(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 December 19, 2017. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{C 000}	The preparation and submission of this plan of correction by the community does not constitute, nor shall it be deemed to constitute an admission of fault or liability on the part of the community nor by agreement by the community as to the truth or accuracy of the fact alleged or the conclusions drawn in the Statement of Licensing Violations regarding the survey completed on 12/19/17. The community prepared and submitted this plan of correction in order to comply with state rules and regulations.	
{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 the facility failed to provide exhaust ventilation in rooms required to be mechanically exhausted. Finding on December 19, 2017: a. Spa Adjacent to Maintenance Room - the exhaust fan over the toilet its not working. Interview with Staff revealed that the parts were on order. b. Assisted Living Main Laundry - An exhaust fan	{C 199}	Tag # C199 Corrective Action: Ventilation will be repaired in Spa Adjacent to Maintenance Room and installed in Laundry. Parts have been ordered. Identification of other Areas: The Maintenance Director will inspect all areas having or needing exhaust to ensure exhaust is working properly or installed and working properly. Measures to Ensure Defective Action does not Recur: The Maintenance Director will be responsible for routine weekly checks to make sure that all equipment is in correct working order and maintain record of those checks. Monitor of Measures: Executive Director will review Maintenance Director records quarterly to ensure repairs necessary are being addressed.	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Marlene L Dunn

TITLE: Executive Director

(X6) DATE: 1.24.18

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL032131	A. BUILDING 01 B. WING	R 12/19/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ATRIA SOUTHPOINT WALK	5705 FAYETTEVILLE ROAD DURHAM, NC 27713

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(C 199)	Continued From page 1 is not installed in the laundry. Interview with Staff revealed that the previous maintenance personnel had left and they thought everything had been corrected.	(C 199)	Date of Completion: March 1, 2018	