

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL039001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 04/18/2018
NAME OF PROVIDER OR SUPPLIER HERITAGE MEADOWS LONG TERM CARE FAC		STREET ADDRESS, CITY, STATE, ZIP CODE 6659 PRIVATE SCHOOL ROAD OXFORD, NC 27565		
(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 18, 2018. There are deficiencies cited in the Biennial Follow Up Construction Survey that remain to be corrected.	{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 ceilings were not kept clean and in good repair. Water stains were found on the ceiling tile throughout the facility. These stains appear to no longer be active leaks. Findings on April 18, 2018: a.) Room 4 - there was a heavily stained ceiling tile in the left closet. Interview with staff revealed that he had missed this location when he was replacing the ceiling tiles. 2. Observations revealed that the rooms were not maintained clean and free of pests. Findings on April 18, 2018: a. Room 3 - dirt and droppings were observed	{C 164}		

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

TITLE

(X6) DATE

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{C 164}	Continued From page 1 behind the chest of drawers and behind the door.	{C 164}		
{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 observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection. Findings on April 18, 2018: a. The fire extinguishers throughout the facility did not have their current annual inspection tags. The tags indicate that the extinguishers were last inspected in July of 2016. Interview with staff revealed that they thought the company had included the inspections of the fire extinguishers at their last visit. The administrator stated that he would contact the company.	{C 189}		