

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>HAL075010</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: <b>01</b><br><br>B. WING: _____ | (X3) DATE SURVEY COMPLETED<br><br><b>R</b><br><b>08/06/2015</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>LAURELWOODS</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1062 WEST MILLS STREET<br/>COLUMBUS, NC 28722</b> |
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| (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<br><br>Report of Follow-up Survey by Dennis Harrell on 8-6-2015.<br><br>Not all deficiencies were corrected. Further action is required.   | (C 000)       | CONSTRUCTION SECTION<br>AUG 27 2015<br>RECEIVED   |                    |
| (C 111)            | Must Have Current San. & Fire Safety Reports<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0302 DESIGN AND CONSTRUCTION<br>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.<br><br>This Rule is not met as evidenced by:<br>2. Based on a review of documents, the most recent Fire Safety Inspection was more than a year ago. Failure to have the building and safety systems inspected and approved as required could result in systems not operating properly in the event of an actual fire.<br><br>Finding on 8-6-2015:<br>A new Fire Safety Inspection has not yet been completed. | (C 111)       |   |                    |



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

*S. Blain* TITLE *Engineer* DATE



DISCOVER *the difference*

CONSTRUCTION SECTION

AUG 27 2015

RECEIVED

August 27, 2015

Division of Health Service Regulation  
HAL075010  
LaurelHurst Retirement Community

Plan of Correction

**C 111 Must Have Current Sanitation and Fire Safety Reports**

Fire Safety is scheduled for August 28, 2105, 9 a.m. Will send report immediately

Original date was July 2, 2015 for inspection; Fire Marshall unavailable.

**Sustained Compliance:** Maintenance Director will make sure Sanitation & Fire Reports are immediately accessible to inspector on future visits.

Respectfully Submitted,

Susan S. Blair  
Executive Director