

PRINTED: 12/30/2015
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL008034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 12/10/2015
NAME OF PROVIDER OR SUPPLIER WINDSOR HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 338 SOUTH RHODES AVENUE WINDSOR, NC 27983		
(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 This is a Report of a Biennial Construction Survey conducted by Greg Cates on December 10, 2015. Based on information gathered from our files, the Facility was first licensed on October 25, 2007 for Sixty (60) residents. Based on this information, we are requiring the facility to meet the 2005 Rules for the Licensing of Domiciliary Homes and the 2008 North Carolina State Building Code, Section 419- Institutional Occupancy.	C 000		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 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- Based on observations, the facility has failed to maintain the building and furnishings in good repair and clean. Findings include: a- One of the towel bars in Room 101 is hanging from the wall b- There is a pattern of corridor doors that are scarred and the finish has been removed. Doors include but are not limited to Rooms 201, 203, and the Service Hall doors. c- The backsplash in Suite 312 is loose at the sink.	C 164	a- Towel rack repaired. b- Doors will be re-stained. Estimated completion date: 01/25/16 c- The Backsplash in Room 312 has been re-caulked.	01/12/16 01/12/16

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

*Kurt A. Rues*TITLE *Executive Director* (X3) DATE *1/13/16*

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C 184	Continued From page 1 d- The floor in front of the commode in Suite 312 is stained. e- There is pattern exhibited in most resident room bathrooms where there is at least one patch on the wall that has not been finished and painted. f- Resident Room 303 is missing two of the drawers in the built-in storage units.	C 184	d- The stain on floor in front of the commode has been removed. e-The bathroom walls will be painted. Estimated completion date:01/25/16 f-New drawers to built-in storage unit will be replaced.Estimated completion date:01/25/16	01/12/16
C 188	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (a) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the building free of hazards by not maintaining the hardware in a functioning manner. This could result in the occupant of the room being locked in the room with no way to EXIT in the event of an emergency. Findings include: a- The door handle to Suite 312 has been removed on both sides although the functioning hardware remains in the door, allowing the door to latch.	C 188	a-The door handle has been replaced.	12/14/15
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

