

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL008039	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 04/15/2015
NAME OF PROVIDER OR SUPPLIER WINSTON GARDENS		STREET ADDRESS, CITY, STATE, ZIP CODE 205 WEST WATSON STREET 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 Report of Follow-up Survey by Frank Strickland on 04/15/2015: Some previously cited deficiencies have been field verified for correction. However, the remaining cited deficiencies require action and a new Plan of Correction is required.	{C 000}		
{C 101}	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost; This Rule is not met as evidenced by: 2. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings on 10/23/2014:	{C 101}		

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

TITLE

(X6) DATE

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{C 101}	Continued From page 1 The door on bedroom 10 is a new hollow-core door which is insufficient to protect the 1-hour fire rated corridor. The hollow-core door is not in conformance with the requirement to use a 1 3/4-inch solid core door or equivalent in accordance with the 1967 NC Building Code.	{C 101}		
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not maintaining the correct door hardware for egress from the facility. This would effect all residents and staff when exiting the facility in case of an emergency by restricting the path of egress. Findings on 04/15/2015: All exterior exit doors have non single-action door hardware.	C 153		
{C 166}	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS	{C 166}		

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{C 166}	Continued From page 2 (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on observation, the building crawlspace was not maintained in a safe manner. This would effect all residents by creating a risk of fire in an area where there is no detection. Findings on 10/10/2014: The crawlspace has combustible storage and the crawlspace door/frame are in in place. These unprotected areas are not in conformance with the requirements to keep crawlspaces clear of stored items in accordance with Licensure Rules.	{C 166}		
{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: 2. Based on observation, the buildings electrical wiring was not maintained in a safe manner. This	{C 189}		

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{C 189}	Continued From page 3 would effect all residents by potentially damaging the wiring causing a short, or a fire. Findings on 10/10/2014: The dryer wiring that penetrates the Laundry floor is not protected from being pinched by the cabinet, and is not secured to the wall. This wiring is not in conformance with requirements of approved wiring methods in accordance with the NEC.	{C 189}			