STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL081008	A. BUILDING: _____ B. WING _____	R 06/10/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SOUTHERN MANOR REST HOME	390 HARDIN ROAD FOREST CITY, NC 28043

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D 000	Initial Comments The Adult Care Licensure Section and the Rutherford County Department of Social Services conducted Annual and Follow-up Surveys and a Complaint Investigation on 6/9/15 and 6/10/15. The county initiated the Complaint Investigation on 6/4/15.	D 000		
D 072	10A NCAC 13F .0305(m) Physical Environment 10A NCAC 13F .0305 Physical Environment (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; (2) If the home has a fence around the premises, the fence shall not prevent residents from exiting or entering freely or be hazardous; and (3) Outdoor walkways and drives shall be illuminated by no less than five foot-candles of light at ground level. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations and interviews the facility failed to assure the outside grounds of the facility were maintained in a clean and safe condition. The findings are: Observation on 6/10/15 at 10:30am of the outside of the facility revealed: - A three sided concrete block structure covered with vinyl siding used for a smoking area by the residents was located approximately 15 feet from the building. - One of the vinyl siding panels on the side of the structure had partially fallen down and was still hanging in an upright position which exposed	D 072		

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D 072	Continued From page 1 rotted wood. - The inside of the same structure had an area of approximately 3 feet by 2 feet on the ceiling of vinyl which was loose and detached from the structure and hanging down approximately 3 inches. - The front portion of the roof of the structure had a piece of vinyl missing approximately 2 feet in length which exposed rotted wood. A confidential interview with a resident revealed the vinyl on the side of the building had fallen several weeks ago, and the reason it pulled away from the concrete blocks was that several residents had tried to pull it down. Observation on 6/10/15 at 10:35am of the exit door located near the smoking structure revealed: - The vinyl on the corners of the walls had pulled away from the vinyl siding exposing gaps between the vinyl and the corner caps. - The vinyl was covered with dirt and charcoal from cigarettes being extinguished on the wall beside the door. - A pedestal chair used for residents was dirty and permanently weather-worn and faded. - The light above the door had a bare bulb that was exposed with no cover. Observation 6/10/15 at 10:37am of the grounds of the facility revealed a partial section of chain link fence, approximately 10 feet in length, with sharp edges of wire and without any type of covering. Continued observation on 6/10/15 at 10:40am of the exterior premises of the facility revealed: - Two worn and faded empty gas containers against the building without caps. - A lawn rake with a broken handle leaning	D 072		

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D 072	Continued From page 2	D 072		

against the building.
- The vinyl siding and gutter was covered with a dark greenish stain.
- The gutter down spout was detached from the building and hanging freely.
- Vegetation was growing in the gutter.

Further observation on 6/10/15 at 10:45am of the exterior of the facility revealed:
- A one inch pipe coming from the building which had the vinyl siding torn away from around the pipe exposing a two inch hole into the wall of the facility.
- An empty bleach bottle covered by grass approximately 5 inches in height.

Observation on 6/10/15 at 10:50am of the exterior back of the facility revealed:
- A 4 inch square hole around the dryer vent and water hose.
- Dryer lint was molded onto the vinyl siding.
- A wooden door leading into the laundry room which was broken, and weather worn with the wood peeling off.

Continued observation on 6/10/15 at 10:55am of the back exterior of the facility revealed:
- A window which would not shut all the way down missing a screen.
- Vegetation growing up the side of the wall into the guttering and under the vinyl of the soffit box.

Continuing observation on 6/10/15 at 11:00am of the exterior side of the facility revealed:
- Two large missing pieces of vinyl siding approximately 2 feet by 2 feet in size from the gable end of the building.
- Vegetation growing up under the vinyl siding of the soffit and under the guttering.
- The vinyl siding around the lower side of the

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D 072	Continued From page 3 building was torn, missing and had ragged edges. - Beside the side exit door the corner of the exit wall has a large piece of vinyl missing approximately 4 inches by 10 inches. - The concrete exit ramp from the side exit door had a clean out drain sticking up approximately 3 inches which created a trip hazard. - The side porch had cigarette butts and ashes on the porch and ground. - There was a large metal can with sharp edges being used as a cigarette receptacle. Observation on 6/10/15 at 11:05am of the front exterior of the building revealed: -Vegetation growing up under the soffit, shutters and gutter of the building. -The gutters around the front of the building were stained green and brown. -The main entrance of the facility had a large black stained area, approximately 6 inches in diameter, on each side of the door where residents had used the wall to extinguish cigarettes. --- On 6/25/15, the facility was requested to provide a plan of protection. THE DATE OF CORRECTION FOR THIS TYPE B VIOLATION SHALL NOT EXCEED JULY 25, 2015.	D 072		
D 074	10A NCAC 13F .0306(a)(1) Housekeeping And Furnishings 10A NCAC 13F .0306 Housekeeping And Furnishings (a) Adult care homes shall:	D 074		

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D 074	Continued From page 4 (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule is not met as evidenced by: THIS IS A TYPE B VIOLATION Per observation and interviews, the facility failed to assure walls, ceilings, and floors throughout the facility, including resident rooms, hallways, dining room, and living room, were clean and in good repair. The findings are: A. Observation of the facility ceilings on 6/9/15 from 9:00am to 10:30am revealed: 1. The center of the ceiling in resident Room #12 near the overhead light fixture had detached from the ceiling joists and sagged approximately 15 degrees from level. - The two pieces of drywall making up the ceiling in Room 12 had separated leaving a quarter inch gap. - Two residents were living in Room #12, and 1 resident was still in bed. Interview with the housekeeper at 9:25am on 6/9/15 revealed the ceiling sag happened within the past 2 days. Interview with the facility Administrator at 9:30am on 6/9/15 revealed the falling ceiling happened just last night, and he was here this morning to repair the ceiling. Interview with Resident #3 who lived in Room #12 on 6/9/15 at 10:15am revealed: - The ceiling started falling a couple of days ago	D 074		

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D 074	Continued From page 5 and he reported it to staff (not specified) at that time. - He was not sure when staff started working on the ceiling to make repairs. - The had heavy rain last night, on 6/8/15, but there were no leaks in the ceiling. Interview with Resident #3 on 6/9/15 at 11:45am revealed: - He was not concerned about the ceiling in his room. - Staff offered to move him to another room this morning, (6/9/15.) Interview with Resident #3's roommate on 6/10/15 at 10:00am revealed: - The ceiling in Room #12 started falling "about 2 to 3 weeks ago." - At that time, he told the Supervisor, and the Supervisor told the Administrator. - Staff offered him another room, due to the sag in the ceiling, on 6/8/15 at about 8:00pm. - He did not want to move to another room and was not concerned about the ceiling falling. 2. The ceiling sheetrock had cracked and sagged the entire length of the dining room approximately 15 feet. - The sag was so pronounced, the heating and air conditioning vent had fallen from the ceiling, leaving an open hole. 3. The exhaust vent in the common shower room ceiling had a heavy build up of dust making the vent ineffective at removing excess moisture from the bathroom. 4. The ceiling fan in the dining room had a build up of dust and debris on the blades, motor, and light fixture.	D 074		

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D 074	Continued From page 6 5. There was a half-inch gap between the wallboard and heating and air conditioning vent in the ceiling of Room 11. 6. Observation of resident Room #4 revealed: - Ceiling fan blades in the room were heavily coated with dust and cobwebs. - Ceiling paint around a vent in the bathroom was chipped away with exposed areas of sheetrock. - Smoke detectors were dingy and coated with dust. Refer to interview with the housekeeper on 6/9/15 at 3:15pm. Refer to interview with dietary manager on 6/9/15 at 3:07pm. Refer to interview with the facility Executive Director on 6/9/15 a at 2:35pm. B. Observation of the facility floors on 6/9/15 from 9:00am to 10:30am revealed: 1. The floor/wall junction on the outside wall of Room #11 had a heavy accumulation of thick black debris. - The floors of Room #11 were badly scuffed and a portion of the vinyl baseboard was missing. - The floor tile under a corner of the bed frame was broken from the weight of the bed. 2. The floor/wall junction of Room #14 had a heavy accumulation of thick, black debris and the vinyl baseboard was missing. 3. The floor-wall junction of Room #9 behind the entrance door had a heavy accumulation of thick black debris and missing vinyl baseboard.	D 074		

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D 074	Continued From page 7 4. Three floor tiles in the dining room were cracked and worn exposing the floor underlayment. 5. Two floor tiles were broken and exposed the cement floor at the front entrance door to the facility. 6. The base of the toilet in the main shower room floor had a heavy build up of a thick, dark brown substance all around the edges. 7. The floor/wall junctions in the common hallways had a heavy accumulation of thick black debris along the entire length of the hallways. 8. The corners of the floors and door junctures in the dining room had heavy dirt buildup. Review of the current facility sanitation rating provided by the facility dated 11/25/13 revealed: - A score of 90 percent. - Tile floors throughout the facility needed to be stripped, waxed and buffed. - The smooth and cleanable finish had worn off the floors. - The floor tiles in the restroom with the shower stall were damaged and stained with rust. - The floor and wall juncture throughout the facility and especially in the main shower room was soiled, not well sealed, and needed repair. - Clean and repair the floor/wall junctures in the facility. Refer to interview with the housekeeper on 6/9/15 at 3:15pm. Refer to interview with dietary manager on 6/9/15 at 3:07pm.	D 074		

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D 074	Continued From page 8 Refer to interview with the facility Executive Director on 6/9/15 a at 2:35pm. C. Observation of the facility walls on 6/9/15 from 9:00am to 10:30am revealed: 1. The dining room air intake vent in the wall above the dining tables was occluded with a heavy build up of dust and debris. 2. All 5 walls adjacent to each dining room table had a sticky build up of a dark brown substance equal to the width of each table. 3. The doors on resident rooms' #1, #3, #4, #7, #9, #12, and #13 and 2 dining room entrance doors were highly scuffed, chipped, and torn down to the wood finish. 4. The louvered closet doors in resident rooms' #2, #3, #8, #9, #11, #13, and #14 were covered with a thick build up of dust and debris. 5. The front door to the facility was dirty and rusted especially near the door handle. 6. The masonry wall beneath the window air conditioner in the living room had deteriorated with peeling paint and loose cement coating due to the condensation from the air conditioner draining into the living room instead of outside the building. 7. The masonry wall next to the desk where the resident phone was located had a 3 foot long scuff. A 12 inch by 2 inch portion of the scuff was so deep the underlying cinderblock wall exposed. Review of the current sanitation sanitation report	D 074		

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D 074	Continued From page 9 dated 11/25/13 revealed: - A demerit for walls in good repair. - An entry on the comment addendum sheet stating, "must continue to work to repair the walls where the plaster is damaged, the paint is damaged, chipping or bubbling. Refer to interview with the housekeeper on 6/9/15 at 3:15pm. Refer to interview with dietary manager on 6/9/15 at 3:07pm. Refer to interview with the facility Executive Director on 6/9/15 a at 2:35pm. _____ Interview on June 9, 2015 at 3:15 pm with the housekeeper revealed: -She did not clean the dining room. -The person in the kitchen was responsible for cleaning the dining room. Interview on June 9, 2015 at 3:07 pm with the dietary manager revealed: -The tables and chairs were cleaned about one month ago. -He was responsible for cleaning the dining room and kitchen. -He had planned on cleaning the dining room tables and chairs the day we came into the facility. Interview with the facility Executive Director on 6/9/15 a at 2:35pm revealed: - Resident rooms are cleaned and mopped daily. - We planned to strip and clean the floors within 90 days of the construction statement of deficiencies. (The construction survey was	D 074		

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D 074	Continued From page 10 completed on 4/8/15.) - She was aware of the problem with all the facility doors, and planned to fix a few each month due to the expense of the repairs. On 6/9/15 the facility provided the following plan of correction: - Resident's were removed from Room #12 and will not be allowed to return until repairs are made. - If this type of incident occurs in other resident rooms, residents will be moved to another room immediately for their safety. - All wall and floors will be kept in good repair, and the Executive Director or Supervisor will monitor 3 times a week to ensure all areas are clean and in good repair. THE DATE OF CORRECTION FOR THIS TYPE B VIOLATION SHALL NOT EXCEED JULY 25, 2015.	D 074		
D 076	10A NCAC 13F .0306(a)(3) Housekeeping And Furnishings 10A NCAC 13F .0306 Housekeeping And Furnishings (a) Adult care homes shall: (3) have furniture clean and in good repair; This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure furniture was clean and in good repair in 5 resident rooms (Rooms #2, #5, #9, #13, and #14), and all the furniture in the residents' dining room.	D 076		

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D 076	Continued From page 11 The findings are: Observation of the residents' dining room on 6/9/15 at 10:15am revealed: - All 5 dining room table edges had a thick, sticky build up of a dark brown substance. - All 16 dining room chairs had a sticky build up of residue on the seats and backs of each chair. - One dining room table had a build up of cob webs between the underside of the top of the table and the metal legs of the table. Observation of resident Room #13 on 6/9/15 at 10:00am revealed: - The dresser had 6 missing knobs or pulls. - The chest of drawers had 7 missing knobs or pulls. - The seat portion of a vinyl chair in the resident's room was torn three-fourths of width of the seat in a Y shaped pattern exposing the filling material of the cushion. Observation on 6/9/15 at 9:15 am of resident Room #5 revealed a chest of drawers had a drawer cover removed and laid on top of the chest. Observation of resident Room #2 at 9:30am on 6/9/15 revealed: - Both night stands had broken doors, missing back supports, and the laminate was worn down to the pressed chipboard material underneath. - The seat portion of a vinyl chair in the resident's room was torn three-fourths the length of the seat, approximately 1 inch wide, and exposing the filling material of the cushion. Observation of resident Room #9 at 9:45am on 6/9/15 revealed the night stand was missing knobs or pulls.	D 076		

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D 076	Continued From page 12 Observation of resident Room #14 at 10:10am on 6/9/15 revealed: - The chest of drawers had 1 missing drawer handle. - The bed on the left side of the room had a missing protective top laminate strip which exposed very sharp edges on the footboard of the bed. Interview with the facility Supervisor on 6/9/15 at 2:40am revealed the dining room furniture had been cleaned "last week." Interview with the facility Administrator on 6/10/15 at 9:50am revealed: - He planned to remove all the old furniture in the facility and replace it with furniture from his other facility, "this week." Review of the most recent county inspection report of the facility dated 11/25/13 revealed a demerit for "furniture clean and in good repair." (The comment addendum noted "need to replace damaged furniture, dressers and bedside tables, in resident rooms.) During the two days of the survey, no residents complained about the condition or cleanliness of the furniture in the facility.	D 076		
D 079	10A NCAC 13F .0306(a)(5) Housekeeping and Furnishings 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	D 079		

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D 079	Continued From page 13 hazards; This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: THIS IS A TYPE B VIOLATION Based on observations and interviews, the facility failed to assure the home was maintained in a clean and orderly manner and free from hazards regarding open light sockets in outside light fixtures posing a shock hazard, a personal floor fan with no front cover exposing fan blades in a resident's room, a defective table lamp in a resident's room posing a shock hazard, sharp broken vinyl molding at the entrance door to the facility, protruding nail heads on a bench in the entrance area to the facility, exposed nails on the furniture in a resident's room, unsecured oxygen tanks in a resident's room, a broken handle with sharp edges on the faucet of a lavatory in a resident's room, a missing toilet tank lid, and dirty heating and air conditioning intake vents in the dining room and hallway. The findings are: During a tour of the facility on 6/9/15 from 9:00am to 10:30am and 6/10/15 from 9:30am to 10:00am the following were observed: - Two ceiling fans in the entrance area to the facility with no bulbs in the light fixtures exposing empty sockets. - Four exterior flood light fixtures at the corners of the building with no bulbs exposing empty sockets. - A broken piece of sharp vinyl molding on the left side of the front entrance door near the door	D 079		

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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
D 079	Continued From page 14 handle. - Protruding nail heads on both ends of of a bench in the front entrance area of the facility. (Residents were observed sitting on this bench throughout the survey.) - A large intake vent with a heavy buildup of dust on the plastic grate on the wall of the dining room next to a dining room table. - A personal pedestal floor fan in Room #5 with a missing front cover exposing the blades of the fan. - Room 7 had four unopened M24 oxygen cylinders of which 2 were laying over on the floor and 2 were standing in a corner of the room. One additional M24 oxygen cylinder was in a pull stand on the opposite side of the room. - Room #11 had 2 drawers of a chest of drawers missing the strip of wood that served as the pull to open the drawer. Fourteen short, but very sharp nails were protruding approximately 1/2 inch along the top edge of the drawers where the missing strip used to be. - The toilet tank lid to the commode was missing in the bathroom of resident Room #4. - Room #3 had a lamp on nightstand with no shade, and socket with bulb loose and leaning with wire exposed and a smoke detector (low battery alarm) sounding. Interview with the Resident living in Room #3 on 6/10/15 at 9:43am revealed: - The smoke detector alarm had been beeping for about a month. - He had not told anyone because he had gotten used to it. - The socket in the lamp had been broken since he had been in the room. Interview with the resident who resides in Room #11 on 6/10/15 at 9:45am revealed:	D 079		

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	HAL081008	A. BUILDING: _____ B. WING _____	R 06/10/2015

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D 079	Continued From page 15 - She stored her clothes in the chest of drawers. - She had not noticed the protruding nails. - She had never been stuck by the nails because she always opened the drawers by pulling the sides. (Resident gestured by raising both hands and made a pulling motion.) Interview on 6/9/15 at 9:58 am with the Supervisor revealed: -There was an oxygen stand in the office that she would get and put the oxygen cylinders in. - The company who supplies the oxygen brings the cylinders and puts them in the residents room without any staff knowing. - They had a new lamp for Room #3 that they would replace it with. - The smoke detectors with the batteries were going to be removed since they had the other ones. (Per observation on 6/10/15 at 11:15am, the battery powered smoke detectors had been taken down and placed in the facility office.) Interview with the Executive Director of the facility on 6/9/15 at 2:35pm revealed: - She was unaware of the exposed nail heads on the bench in the front porch area. - She was made aware of the the problems with the external light fixtures on the last construction survey. (The construction survey was completed on 4/8/15.) - She was unaware of the missing fan cover on the pedestal floor fan in Room #5. - She was unaware of the lamp in Room #3 posing a shock hazard. - She was made aware of the broken vinyl molding around the front door during a construction survey on 4/8/15. _____ On 6/9/15, the facility provided the following plan	D 079		

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D 079	Continued From page 16 of protection: - The facility Executive Director or Supervisor will perform a walk through of the facility daily to ensure facility is free from any hazards. - If hazards are found, the Executive Director or Supervisor will remove or repair hazards. - If the Executive Director or Supervisor cannot repair the hazards, a contractor will be on call to make the repairs. THE DATE OF CORRECTION FOR THIS TYPE B VIOLATION SHALL NOT EXCEED JULY 25, 2015.	D 079		
D 105	10A NCAC 13F .0311(a) Other Requirements 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. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations, and interviews the facility failed to assure the facility dryer ventilation was free of lint and plumbing was maintained in a safe and operating condition. The findings are: Observation on 6/10/15 at 10:45am of the exterior dryer vent revealed: - A 5 inch 90 degree vent turned toward the ground. - The vent had a plastic grid over the opening. - There was approximately three inches of lint	D 105		

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D 105	Continued From page 17 covering the end of the vent and extending inside the ventilation pipe. Observation on 6/10/15 at 11:00am of the laundry room revealed the facility clothes dryer was attached to the vent from the inside with an aluminum type hose. Interview with the Supervisor on 6/10/15 at 10:55am revealed: - The Medication Aide (MA) had checked the dryer vent last month, but had not checked it this month. - The facility does not keep a log of the dryer vent checks. - The Supervisor was not aware the dryer vent was clogged now. Interview with the Supervisor on 6/10/15 at 11:10am revealed: - She would make sure that the vent was immediately cleaned. - She would assure that the vent was checked weekly. Inteview with the MA on 6/10/15 at 11:20 am revealed she had cleaned the dryer vent about one month ago. Review of the current Fire Inspection Report dated 11/14/13 revealed: - Fire extinguishers needed the annual service due. - Combustibles too close to the gas hot water heater. - Documentation needed of the fire alarm service. Attempts to contact the county Fire Marshall prior to exit from the facility were unsuccessful.	D 105		

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D 105	Continued From page 18 B. Observation of resident Room #11 on 6/9/15 at 9:30am revealed: - A wall mounted lavatory in the room beside the entrance door. - The hot water was turned off at the supply line connection. - The sink drain was corroded and leaked badly onto the floor when the cold water was turned on. Interview with the resident who resided in Room #11 at 10:08am on 6/9/15 revealed: - She had lived in the facility 3 months. - The sink drain in her room (#11) had leaked since she was admitted. - She hadn't told anyone, but "they know about it." - They (staff) planned to fix it but she was not sure when. Interview with the facility Director on 6/9/15 at 10:10am revealed: - The leak had just happened. - A plumber had been called to repair the leak. Review of the most recent county inspection report dated 11/25/13 revealed a note in the comment addendum sheet stating, "need to repair the leaking handsink in Room #11." Observation of the sink in Room #11 on 6/10/15 at 10:30am revealed the drain had been repaired with new PVC pipe and did not leak. --- On 6/10/15, the facility provided the following plan of protection: - Executive Director or Supervisor will immediately remove lint and check it one time a week to ensure lint is removed and document. - (In another plan of protection the Executive	D 105		

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D 105	Continued From page 19 Director noted either she or the Supervisor would check the facility 3 times a week to ensure all areas of the facility are clean and in good repair.) THE DATE OF CORRECTION FOR THIS TYPE B VIOLATION SHALL NOT EXCEED JULY 25, 2015.	D 105		
D912	G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure every resident received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations in the area of walls, ceilings and floors clean and in good repair, facility free from environmental hazards, and facility dryer free from lint and operated in a safe condition. The findings are: Based on observations and interviews the facility failed to assure the outside grounds of the facility were maintained in a clean and safe condition. [Refer to Tag D72, 10A NCAC 13F .0305 (m) Physical Environment, (Type B Violation.)] Per observation and interviews, the facility failed to assure walls, ceilings, and floors throughout	D912		

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D912	Continued From page 20 the facility, including resident rooms, hallways, dining room, and living room, were clean and in good repair. [Refer to Tag D74 10A NCAC 13F .0306(a)(1) Housekeeping and Furnishings, (Type B Violation.)] Based on observations and interviews, the facility failed to assure the home was maintained in a clean and orderly manner and free from hazards regarding open light sockets in outside light fixtures posing a shock hazard, a personal floor fan with no front cover exposing fan blades in a resident's room, a defective table lamp in a resident's room posing a shock hazard, sharp broken vinyl molding at the entrance door to the facility, protruding nail heads on a bench in the entrance area to the facility, exposed nails on the furniture in a resident's room, unsecured oxygen tanks in a resident's room, a broken handle with sharp edges on the faucet of a lavatory in a resident's room, missing toilet tank lid, and dirty heating and air conditioning intake vents in the dining room and hallway. [Refer to Tag D79, 10A NCAC 13F .0306 (a)(5) Housekeeping and Furnishings, (Type B Violation.)] Based on observations, and interviews the facility failed to assure the facility dryer ventilation was free of lint and plumbing was maintained in a safe and operating condition. [Refer to Tag D105, 10A NCAC 13F .0311(a) Other Requirements, (Type B Violation.)]	D912		