

970923

PRINTED: 04/20/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL085014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 04/13/2016
NAME OF PROVIDER OR SUPPLIER SPRING ARBOR OF WILMINGTON		STREET ADDRESS, CITY, STATE, ZIP CODE 809 JOHN D BARRY DRIVE WILMINGTON, NC 28412		
(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 Construction Survey by Frank Strickland on 04/13/2016: Based on the information obtained from DHSR database, the Spring Arbor of Wilmington facility was first licensed on 08/06/1997. The facility is currently Licensed for SIXTY-SIX BEDS including FOURTEEN SCU Beds. Therefore, we are requiring that this facility meet the 1996 "Regulations for Homes for the Aged and Disabled ; Minimum standards and Regulations and the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1996 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I). Deficiencies were cited and a Plan of Correction is required.	C 000	See attached	
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-Based on observation, the facility has not maintained and serviced the HVAC supply and return air grilles.	C 164		

Division of Health Service Regulation

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

TITLE

(X5) DATE



0890 T4VV21

Executive Director

5-5-16

STATE FORM

If continuation sheet 1 of 4

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL065014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 04/13/2016
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C 164	Continued From page 1 Findings on 04/13/2016: The exhaust grilles have excessive particulate build-up in all of the resident's bathrooms. 2-Based on observation, the facility has not maintained and serviced the HVAC supply and return air grille finishes. Findings on 04/13/2016: The supply diffusers are rusted and the paint finishes are peeling that are located in the Main Dining Hall.	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, the facility has not maintained in a safe and operating condition of the corridor handrails. This could affect all residents by disrupting grasping support for stability of a resident. Findings on 04/13/2016: The corridor handrails are unfastened to wall brackets located outside the following rooms: (a) Room 103 (b) Room 105	C 189		

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C 189	Continued From page 2 2-Based on observation, the facility has not maintained in a safe manner clearances for electrical components. This may create hazards. Findings on 04/13/2016: There are housekeeping equipment blocking access to the electrical control panels that are located in the Main Mechanical Equipment Room.	C 189		
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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, this facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff by subjecting them to house-keeping odors. Findings on 04/13/2016: The mechanical exhaust fans are not exhausting	C 199		

Spring Arbor of Wilmington, FID #970923, Hal 065014
Plan of Correction for DHSR Construction Survey on 04/13/2016

Section .0300- Physical Plant, 10A NCAC 13F.0306 Housekeeping and Furnishings

HVAC Supply and return air grilles have been cleaned and repainted.

Completed on 04/14/2016

Section .0300-Physical Plant, 10A NCAC 13F.0311 Other Requirements

Corridor handrails have been tightened. Completed 04/14/2016

Area has been cleared in front of electrical control panels. Completed 04/14/2016

Mechanical exhaust fans have been repaired.

- Rooms 113, 214, and 9. Completed 04/26/2016
- Biohazard Storage. Part Ordered on 04/29/2016- Scheduled repair date 05/12/2016

In order to ensure on-going compliance, bathroom exhaust fan checks, as well as Return grill checks have been added to Room Turn list and staff have been in-serviced to report mechanical issues as any arise. Our Physical Plant Audit tool will be used by Maintenance Personnel to check compliance at least quarterly. These will be submitted to the Executive Director for documentation.