

PRINTED: 06/28/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL078065	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 06/09/2016
NAME OF PROVIDER OR SUPPLIER MORNING STAR AL # 3		STREET ADDRESS, CITY, STATE, ZIP CODE 941 GOINS ROAD PEMBROKE, NC 28372		
(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 Billy S. Bryant conducted on 06/09/2016. Information gathered from DHSR records indicate this facility was first licensed on 03/16/1990 as a HA. The facility is currently licensed for 12 beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1978 (Revision 10), Institutional Occupancy, of the North Carolina State Building Code(s), and the 1984 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION 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. This Rule is not met as evidenced by: 1. Based on an interview with the provider, sanitation and fire and building safety inspection reports were not available for review by the surveyor. Finding on 06/09/2016: a. A current building sanitation inspection report, fire official's inspection report, and fire alarm inspection report were not available for the surveyor's review at the time of the inspection.	C 111	The current sanitation report, fire official's report and fire alarm inspection report were faxed to the inspect surveyor's office on 6/10/16 by the Administrator.	6/10/16

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

STATE FORM

6889

2D5521

TITLE

(X6) DATE

If continuation sheet 1 of 7

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C 164	Continued From page 1	C 164		
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 floors have not been kept clean and in good repair. Findings on 06/09/2016: a. Small Restroom - There is wax buildup except for the high traffic area which is dirty where the wax has worn away. b. Dining Room - There is wax buildup except for the high traffic areas which is dirty where the wax has worn away. c. Main Corridor - There is wax buildup except for the high traffic areas which is dirty where the wax has worn away.	C 164 C 164	a) The small restroom area floor will be cleaned and waxed. b) The dining room floor will be cleaned and waxed. c) The main corridor will be cleaned and waxed.	
C 165	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;	C 165		

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C 186	Continued From page 2 (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility was not maintained free from hazards due to equipment used by resident for assistance not maintained or missing. Finding on 06/06/2016: a. Tub Room - There is no grab bar at the tub. b. Adjacent to Room #6 - The corridor hand rail has completely detached from its mounting bracket. 1. Based on observation the facility was not maintained free from hazards due to the use of improper materials for installing equipment. Finding on 06/06/2016: a Laundry - The dryer vent duct is not constructed of metallic material.	C 186	a) Tub room - a grab bar has been installed. b) the hand rail will be fixed. a) Laundry - the dryer vent duct will be replaced with the proper material.	6/30/16 7/29/16 7/29/16
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.	C 185		

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C 185	Continued From page 3 (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on an interview with the provider the facility did not comply with the rule to maintain records of fire drill rehearsals. Finding on 06/09/2016: a. Records of fire drill rehearsals were not available for the surveyor's review at the time of the inspection.	C 185	a) The fire drill rehearsals were faxed to the surveyor's office on 6/10/16 by the Administrator.	6/10/16
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 there is a failure to maintain electrical emergency/safety related equipment in operating condition. This could effect occupants of the facility if exits sign are not illuminated to designate the exits doors during an emergency. Finding on 06/09/2016: a. Exit Sign Adjacent to Men's Room - The directional exit sign above the door is not illuminated while on house (AC) current.	C 189	a) The exit signs have been ordered and will be replaced by the alarm company.	7/29/16

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

MORNING STAR AL # 3**941 GOINS ROAD
PEMBROKE, NC 28372**

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C 189	Continued From page 4 b. Exit Sign Adjacent to Room #8 - The directional exit sign above the door is not illuminated while on house (AC) current. 2. Based on observation fire safety equipment in the facility was not maintained in a safe and operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment could not function as needed. Findings on 06/09/2016: a. Fire Extinguishers - Monthly checks of the extinguishers are not being conducted. 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors are required to completely close and latch in the event of a fire. The occupants in the facility could be effected if doors do not latch and remain closed so as to limit the spread of smoke or fire to the area of origin. Finding on 06/09/2016: a. Laundry - The dryer is pulled away from the wall so that it is in the path of the door swing and prevents the laundry door from being closed. 4. Based on observation there is a failure to maintain electrical safety devices in operating condition. This could effect occupants of the facility using electrical devices whose safety features to prevent electrical shock are not function. Finding on 06/09/2016: a. Kitchen - The GFCI electrical outlet adjacent to the left side of the sink was coated with a thick	C 189	b) The exit sign has been ordered and will be replaced by the alarm company. a) The fire extinguishers have been checked and signed off on. This area will be monitored by the Administrator on a monthly basis to ensure compliance. a) Laundry - The dryer has been pushed back in order to close the door. a) Kitchen - The GFCI outlet has been fixed and is working properly.	7/29/16 6/30/16 6/30/16

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C 189	Continued From page 5 layer of paint so that the auto trip mechanism could not function. 5. Based on observation building equipment was not maintained in a safe condition. Failure to maintain door exiting hardware could effect occupants of the facility exiting from the door in the event of an emergency. Finding on 06/09/2016: a. The lever type door knob completely detached from the door lockset when operated to open the exit door.	C 189	a) The lever type door knob has been replaced.	6/30/16
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 observations the facility failed to provide an adequate supply of hot water to all fixtures used by the residents between 100°F and 116°F. Finding on 06/09/2016:	C 195		

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C 195	Continued From page 6 a. Water temperatures taken at three different locations used by residents showed resulting water temperatures at 94°F.	C 195	a) The water temp has been adjusted to the correct temperature. This area will be monitored monthly by the RCC to ensure compliance.	6/17/16	