STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL078049	A. BUILDING: _____ B. WING _____	07/18/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HARRINGTON ASSISTED LIVING #6	1685 CANAL 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 The Adult Care Licensure Section and Robeson County Department of Social Services conducted an annual survey on July 14, 2016 and July 18, 2016.	C 000		
C 074	10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping And Furnishings (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on record reviews, observations and interviews, the facility failed to keep the walls and floors of the residents' rooms, the shared toilet rooms between resident rooms, the guest toilet room off the facility entrance, and the community shower room clean and in good repair. The findings are: 1. Observation of the guest toilet room to the left of the facility entrance at 1:30pm on 7/14/16 revealed: -There was a hole in the door for a doorknob, but no doorknob to open the door. -The entrance into the room was blocked by a blue armchair. -There were no soap or towels in the bathroom. -The floor was dirty with dust, debris, and dead insects including crickets and spiders. -An artificial Christmas tree was stored in front of the toilet. Interview with the Medication	C 074		

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C 074	Continued From page 1 Aide/Supervisor-in-Charge at 1:15pm on 7/14/16 revealed: -The guest bathroom was used for storage, there was not much storage space available in the facility. -She did not know where the armchair was to be used. -The Personal Care Aide (PCA) was in charge of housekeeping, she did not know when he had last cleaned the guest bathroom. -The Administrator may know where the chair was supposed to be used or to be relocated. Interview with the PCA at 1:20pm on 7/14/16 revealed: -The guest bathroom was not used. -The armchair had always been stored there. He did not know where the chair was supposed to be stored or used. Review of the annual Inspection of Residential Care Facility report dated 8/12/15 revealed: -The inspector commented "please remove Christmas tree from guest bathroom and replace door handle". The Administrator was not available for interview. 2. Continued tour of the facility from 1:30pm to 3:00pm revealed: -The six resident rooms had sheet vinyl glued to the walls surrounding each bed. The vinyl was estimated to be 4 feet in height, and rounded the head and one long side of the bed, which was placed in a corner of the room. Observation of the vinyl revealed: -The vinyl sheets were coming off the wall, the glue at the tops of the sheets was loose. -The vinyl sheets were dusty and sticky to the touch.	C 074		

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C 074	Continued From page 2 -The vinyl sheets had streaks of black and gray dirt. Interview with the PCA at 2:00pm revealed: -The facility put the vinyl sheets around the beds to keep the walls clean and to prevent damage to the walls. -He did not clean the vinyl sheeting on the walls. -He did not have a schedule for deep cleaning the rooms. Confidential interviews with two residents revealed: -They did not mind the vinyl sheeting on the walls. -They thought the vinyl sheeting needed to be re-glued. -The gap between the wall and the vinyl sheeting was sometimes used to hold personal possessions. 3. Observation at 1:30pm on 7/14/16 of the first resident room on the left side of the hall revealed: -There was a patched, unpainted repair to the wall to the right of the door of the shared toilet room. -There was a rectangular hole, approximately 12 inches square, cut into the drywall near the floor, to the right of the window and on the wall to the left of the shared toilet room. A pipe with attached vinyl hosing was visible in the opening. Interview with the resident who occupied the room revealed: -The "hole had been there a while, can't remember how long". -They had to cut the hole in the wall to fix the plumbing. -He did not mind having the hole in the wall, "They will get around to fixing it". -He did not mind the unfinished state of the	C 074		

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C 074	Continued From page 3 drywall patch to the right of the bathroom door. Review of the annual Inspection of Residential Care Facility report dated 8/12/15 revealed: -One point was deducted for walls not kept clean and in good repair. -The inspector commented "please repair holes in wall where needed". 4. Observation of the community shower room at 3:15pm on 7/14/16 revealed: -Black mold was present in the tile grooves of the shower floor and from the floor to three feet up the walls of the shower. Interview with the Medication Aide/Supervisor-in-Charge at 3:15pm revealed: -The PCA was supposed to keep the community bathroom and shower clean. -She thought he cleaned the bathrooms every day. The PCA was not available for interview. 5. Observation of the residents' rooms and shared toilet rooms on 7/14/16 between 1:30pm - 3:00pm revealed: -The floors were dusty and littered with debris and dead insects. -Dust and debris accumulated at the baseboards of the rooms, behind furniture, and under the beds. Review of the annual Inspection of Residential Care Facility report dated 8/12/15 revealed: -Two points were deducted for floors not kept clean and in good repair. -The inspector commented "please keep floors clean, even under beds".	C 074		

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C 074	Continued From page 4 The PCA was not available for interview. Interviews with two residents revealed they saw the PCA sweep the facility floors every day.	C 074		
C 076	10A NCAC 13G .0315(a)(3) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (3) have furniture clean and in good repair; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to assure the vinyl sofa in the living room, the bed for resident #1, and the chairs in two resident rooms (Residents #3 and #4) were in good repair. The findings are: 1. Observation on 7/14/16 at 1:15pm of the vinyl sofa in the living room revealed the vinyl covering was peeling off. Interviews with three residents revealed: -The sofa "was always that way". -The sofa was" fine for them", it was comfortable. -The Owner will decide when to replace the sofa, it was not their call to ask for new furniture. Interview with the Personal Care Aide at 1:45pm on 7/14/16 revealed: -Other visitors to the facility had commented on the sofa's condition. -He did not know if the sofa's peeling could be	C 076		

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C 076	Continued From page 5 fixed. 2. Observation of Resident #1's wooden bed on 7/14/16 at 2:15pm revealed: - It appeared to be broken, as the headboard leaned out at a 15-degree angle against the wall and the footboard leaned at a 20-degree angle out into the room. -The headboard and foot board were bolted to the bed siderails, which laid on the floor. -There was no boxspring. -The mattress was laid on the floor. Interview with Resident #1 at 3:30pm on 7/14/16 revealed he accepted the bed, even though it was too low to comfortably get in and out of bed. 3. Observation on 7/14/16 at 1:30pm of the chair in Resident #2's room revealed: -There was a long split in the seat cushion of the vinyl armchair. Observation on 7/14/16 at 2:15pm of the chair in Resident #4's room revealed: -There was a rip in the vinyl of the side chair. Interview on 7/14/16 at 1:30pm with Resident #2 revealed the chair was still usable, but it would be nice to have an undamaged chair. Interview on 7/14/16 at 2:15pm with Resident #4 revealed the chair was fine for him, it will eventually be replaced. Interview with the Medication Aide/Supervisor-in-Charge at 5:00pm on 7/18/16 revealed: -She had not noticed damage to the furnishings. -She will inform the Owner/Administrator of the problems.	C 076		

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C 079	10A NCAC 13G .0315(a)(6) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (6) have supply of bath soap, clean towels, washcloths, sheets, pillow cases, blankets, and additional coverings adequate for resident use on hand at all times; This rule apply to new and existing homes. This Rule is not met as evidenced by: Based on observations, record review, and interviews, the facility failed to keep a supply of soap and towels available for resident use in the bathrooms. The findings are: Tour of the facility from 1:00pm-3:30pm on 7/14/16 revealed: -Soap dispensers and paper towel dispensers were attached to the walls of all six bathrooms of the facility. -All bathroom soap dispensers and paper towel dispensers were empty. -One bathroom had a used hand towel hanging on the towel rack. -There was no soap or paper towels in the staff bathroom. -There was no soap or paper towels in the guest bathroom off the living room, as this bathroom was used for storage. Interview with the Personal Care Assistant at 2:00pm on 7/14/16 revealed he was responsible for stocking the facility bathrooms with soap and towels.	C 079		

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C 079	Continued From page 7 Interviews with two residents revealed: -The facility did not keep the bathrooms used by residents stocked with liquid soap and paper towels. -Residents have their own soap for bathing in the community bathroom. -Residents did not keep their own soap in the bathrooms because "it disappears", "I think other residents take it:" -Residents were given towels for use when showering by the Personal Care Assistant,. -The facility did not stock cloth towels in the residents' bathrooms. Interview with the Medication Aide/Supervisor-in-Charge on 7/18/16 at 5:00pm revealed: -The facility got their supplies from the office manager. -The office manager ordered supplies for several family care homes of the Owner/Administrator. -The PCA picked up soap and towels for the facility at least once a week. Neither the Office Manager nor the Administrator were available for interview. Review of the annual Inspection of Residential Care Facility report dated 8/12/15 revealed two points were deducted from the facility score for failure to provide soap and towels.	C 079		
C 086	10A NCAC 13G .0315(b)(1) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (b) Each bedroom shall have the following	C 086		

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C 086	Continued From page 8 furnishings in good repair and clean for each resident: (1) A bed equipped with box springs and mattress or solid link springs and no-sag innerspring or foam mattress. Hospital bed appropriately equipped shall be arranged for as needed. A water bed is allowed if requested by a resident and permitted by the home. Each bed is to have the following: This rule apply to new and existing homes. (A) at least one pillow with clean pillow case; (B) clean top and bottom sheets on the bed, with bed changed as often as necessary but at least once a week; and (C) clean bedspread and other clean coverings as needed; This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure that one resident had a bed equipped with both a mattress and boxspring, that two of six residents had mattresses that were clean and odor-free, that two residents had sheets on their bed while napping during the day, and that four of six residents had bedspreads that were not ripped and tattered. The findings are: 1. Observation of Resident #1's bedding revealed: - The bedspread was tattered and soiled. -The bedspread backing was shredded, and pieces of it fell on the floor when it was moved by the Personal Care Aide (PCA). -There were no sheets on the bed. -The bedroom had a strong odor of urine. Interview with the PCA at 2:15pm on 7/14/16 revealed that Resident #1 owned that bedspread	C 086		

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C 086	Continued From page 9 and liked it, he would not get rid of it. Interview with Resident #1 at 3:30pm on 7/14/16 revealed: -The facility provided the bedspread, it was not his property. -He would like to have a new bedspread. -The PCA was supposed to wash his sheets today, "he must not have washed my sheets yet, or maybe there aren't any clean sheets to give me right away." -Resident #1 was observed to lie down for a nap on a mattress with no sheets, a pillow without pillowcase, and covering himself with a shredded bedspread. 2. Observation of Resident #2's bed at 3:45pm on 7//14/16 revealed: - He had a hospital bed. -The mattress had a vinyl cover, and was wet with urine. -There were no sheets on the bed. -There was no bedspread or other bed covering. -Resident #2 entered the room, picked up a blanket that had fallen under the bed, laid down on the bed and wrapped his head and body with the blanket. -He did not respond to surveyor questions. Interview with the Medication Aide/Supervisor-in-Charge (MA/SIC) at 4:00pm revealed: -Resident #2 was not interviewable. -Resident #2 was incontinent. -Staff had to change his bedding at least once a day, sometimes more often. Observation of the laundry room at 4:15pm on 7/14/16 revealed: -Used bedding for Resident #2 was on the floor,	C 086		

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C 086	Continued From page 10 as identified by the MA/SIC. -The bedspread had fecal matter on it. -The sheets smelled of urine. A second interview with the MA/SIC at 4:15pm on 7/14/16 revealed the bedding will be washed today. 3. Observation of the bedding of Resident #4 at 3:30pm on 7/18/16 revealed the bedspread was faded, and had a large tear in the middle, estimated to be 12 inches in length. Interview with Resident #4 at 3:30pm revealed: -It was not his property, the facility provided it for him. -He used whatever bedding the facility provided, he had no complaints. -He would like a new bedspread. 4. Observation of the bedding used by Resident #5 at 3:45pm on 7/18/16 revealed burn holes on the comforter surface. Resident #5 was not available for interview. Interview with the MA/SIC at 5:00pm on 7/18/16 revealed: -She was not aware of the damaged bed coverings. -She would inform the Owner/Administrator of observations of residents' bedding.	C 086		
C 090	10A NCAC 13G .0315(b)(5) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (b) Each bedroom shall have the following	C 090		

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C 090	Continued From page 11 furnishing in good repair and clean for each resident: (5) a minimum of one comfortable chair (rocker or straight, arm or without arms, as preferred by resident), high enough from floor for easy rising; This rule apply to new and existing homes. This Rule is not met as evidenced by: Based on observation, the facility failed to assure each resident's room had a comfortable chair for one of three sampled residents (#2). The findings are: Observation of Resident #2's room at 3:45pm on 7/14/16 revealed there was no comfortable chair in the room for use by the resident or a visitor. Based on observations, interviews, and record review, Resident #2 was not interviewable due to diagnosis of dementia. Interview with the Medication Aide/Supervisor-in-Charge at 5:00pm on 7/18/16 revealed: -She was not aware there was a requirement for a chair in the resident rooms. -She would inform the Owner/Administrator of the requirement.	C 090		
C 256	10A NCAC 13G .0904(a)(1) Nutrition and Food Service 10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (1) The kitchen, dining and food storage areas shall be clean, orderly and protected from contamination.	C 256		

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C 256	Continued From page 12 This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to assure the kitchen cabinets and oven were kept clean and in good repair. The findings are: Tour of the facility kitchen at 4:30pm on 7/14/16 revealed: -Kitchen cabinets and drawers were littered with spills, food particles, dust and debris inside. -Kitchen cabinet doors were greasy to the touch and had gray-brown streaks of dirt on the surfaces. -The kitchen oven was greasy and black with burned-on food. -Interview with the Personal Care Aide at 12:45pm on 7/13/16 revealed: -He provided personal care, housekeeping, and meal preparation for six residents during his work hours. -He wiped up spills in the kitchen as they occurred. -He had not been instructed to do deep cleaning of the kitchen. -He had not cleaned the oven. -He had not cleaned the cabinet doors or interiors, nor had he cleaned the cabinet drawers. Interview with the Medication Aide/Supervisor-in-Charge (MA/SIC) at 5:00pm on 7/18/16 revealed: -She was aware there were areas of cleaning to address. -She was the Supervisor-in-Charge when the Owner/Administrator was absent, she would inform her of the dirty cabinets and appliances.	C 256		

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C 256	Continued From page 13 -She was not aware of a deep cleaning schedule for the facility. -None of the residents had complained to her about the facility's condition.	C 256		
C 260	10A NCAC 13G .0904 (b-1) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service Food Preparation and Service in Family Care Homes: (1) Sufficient staff, space and equipment shall be provided for safe and sanitary food storage, preparation and service. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to provide sufficient tableware (plate, bowls, cups, and glasses) for safe and sanitary food service. The findings are: Observation of the facility's supply of tableware at 4:45pm on 7/14/16 revealed: -The facility had five full-size dinner plates for dinner service for six residents. -Of the five plates, one stoneware plate had a 1/2 inch wedge missing on the plate rim and another plate had cracks on the plate. -The facility had five 10-ounce glasses for cold beverages. - There were smaller plates available for food service, such as saucers for cups and smaller dessert plates.	C 260		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HARRINGTON ASSISTED LIVING #6	1685 CANAL 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 260	Continued From page 14 -There were a variety of small cups and glasses available for food service, ranging from 4 to 8 ounce capacity. Observation of the evening meal on 7/14/16 from 5:00pm - 6:00pm revealed: -Iced tea was served in the five 10-ounce size glasses to the five residents who were seated at the dining room table for the evening meal. -Water was not served to the residents. -A sixth resident came in at 5:30pm to eat his meal. -The Personal Care Aide (PCA) washed a plate and glass for the sixth resident for service of his dinner meal. The plate and glass for the sixth resident's meal service had been used by another resident earlier in the meal. Interview with the PCA at 5:30pm on 7/14/16 revealed: -He was aware the facility was low on plates and beverage serveware. -He had not informed the Owner/Administrator that more plates and glasses were needed. -He was not aware water was to be served with every meal. -He stated the residents had broken too many dishes and glasses, the facility needed to buy strong, unbreakable plastic dishes and drinkware. The Owner/Administrator was not available for interview.	C 260		