STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL055003	A. BUILDING: 01 B. WING	05/25/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKEWOOD CARE CENTER	7551 OPTIMIST CLUB ROAD DENVER, NC 28037

(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 05/25/2016: Records indicate this facility was first licensed on 08/24/1989 as a HA and is currently licensed for 60 Beds. Therefore, this facility was surveyed for conformance with the 1987 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure and 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 9) Edition, of the North Carolina State Building Code-Institutional Occupancy. Deficiencies have been cited and a Plan of Correction is required.	C 000	As stated in C 164-1, the wall surfaces of the bathrooms have not been maintained. Corrective action was put into place on May 26, 2016. Facility housekeepers performed a deep, detailed cleaning of both East and West wing bathrooms, including the floors and walls to remove mold. These detailed cleanings have occurred weekly since May 26th on every Thursday afternoon and shall continue indefinitely. Resident CNAs and caregivers have been instructed on how to properly spray each shower down with cleaner after each resident's use to help prevent the buildup of mold. Facility CNAs and caregivers began spraying after each shower on May 27, 2016. The facility manager, Wendy Dawson is responsible for ensuring the housekeepers, CNAs and caregivers take time to complete these tasks each week. On Friday June 3, 2016 (after 2 detailed cleanings of both facility bathrooms) facility maintenance repaired the deteriorated sections in both East and West hall bathrooms. (see provided pictures) Facility maintenance will be responsible for weekly inspection to ensure deterioration does not occur again and if so, will complete repair within three days of observance.	6-29-16 5-27-16 6-3-16
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 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 observations, this facility has failed to maintain the wall surfaces in the bathing rooms. This could affect the residents while bathing in such spaces. Findings on 05/25/2016: The walk-in shower side walls have mold and are	C 164	In regards to C 164-2, facility maintenance repaired both of the stated doors on Friday June 3, 2016. The damaged edges were filed down manually, doors were stained, and appropriate hinges were repaired. Each door opens and closes with ease and moves smoothly across the floor. (see provided pictures) Facility manager will be responsible for monitoring all doors within the facility to ensure all facility doors maintain their operation and appropriate physical condition. Then, facility manager will relay all messages to facility maintenance regarding repairs that need to occur. Facility maintenance will make repairs within 3-5 days, unless required parts are ordered. Upon arrival of parts, doors will immediately be repaired. FYI, additional damaged exterior door located near trash and soiled linen rooms has been ordered and is expected to arrive and be installed by July 15, 2016.	6-3-16 7-15-16

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Rebecca B. Childers Co-Administrator
(X6) DATE
6/29/2016

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	HAL055003	A. BUILDING: 01 B. WING	05/25/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKEWOOD CARE CENTER	7501 OPTIMIST CLUB ROAD DENVER, NC 28037

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C 164	Continued From page 1 deteriorating in the center stalls located at the following locations: (a) East Wing-Women's Shower Room (b) West Wing-Men's Shower Room 2-Based on observations, this facility has failed to maintain the operation and physical condition of all interior doors. This will eventually affect all residents and staff during the everyday use of the door. Findings on 05/24/2016: The doors located at the following locations have damaged edges, scratched or unattached to the hinges and dragging on the floor: (a) Room 29-Bathroom door (b) West Wing-Men's Shower Room 3-Based on observation, the facility has not maintained and serviced of plumbing fixtures. This will affect all residents and staff. Findings on 05/25/2016: The toilets are not secured to the floor that are located at the following locations: (a) Room 29 Bathroom (b) West Wing-Men's Shower Room 4-Based on observation, the facility has not maintained and service of floor surfaces and finishes. This will affect all residents and staff by creating trip hazards. Findings on 05/25/2016: The ceramic tile flooring in the bathroom of Room 29 is cracked and missing in different locations. Also, the flooring is dirty.	C 164	Housekeepers checked all facility toilets to ensure they were securely attached to the floors on May 26, 2016. They provided a list to the facility manager who relayed this information to facility maintenance. Three toilets within the building; two of which are mentioned in C164-3 required repair and facility maintenance performed these repairs on Tuesday, May 31, 2016. Facility maintenance was able to purchase needed materials at Lowes to bolt toilets securely to the floor. Housekeepers will check toilets daily as they are cleaning them to ensure all facility toilets are securely attached to the floor. Any repairs needed will be relayed to the facility manager who will then follow up with facility maintenance to ensure these repairs are completed within three days. Replacement tiles were purchased on Friday, June 3, 2016. They were delivered and installed where necessary by facility maintenance on Friday, June 24, 2016. Several tiles were replaced in Room 29 as stated in C164-4 as well as other areas within the facility. (see attached pictures) Housekeepers were instructed to mop each bathroom at minimum once a day and more frequently when accidents occur. Housekeepers will monitor flooring throughout the facility to ensure tile is solid and no cement flooring is exposed. Any repairs needed will be relayed to the facility manager who will then follow up with facility maintenance to ensure these repairs are completed within a timely manner. Facility manager will be responsible for checking behind housekeepers to ensure the flooring within the facility is being cleaned daily.	5-26-16 5-31-16 6-3-16 6-24-16

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKEWOOD CARE CENTER	7981 OPTIMIST CLUB ROAD DENVER, NC 28037

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C 189	Continued From page 2	C 189	In regards to C189-1, facility maintenance repaired sheet rock ceiling in both rooms and hallway where damaged had occurred from water leaking. The old sheet rock was removed and new sheet-rock was installed. Facility maintenance constructed the new sheet-rock ceilings on June 9th and 10th, 2016. Appropriate residents were relocated during this construction. Facility owner will do monthly checks on sprinkler system to ensure they have been properly flushed to prevent water leaks. All facility staff will be responsible for monitoring the ceilings of the facility for water spot damage, holes, cracks, etc. Once these types of occurrences are noted, facility maintenance will repair the ceiling as needed once the safety and relocation of necessary residents has been ensured. (see attached pictures)	6-9-16 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, the facility was not maintained in a safe manner due to breaches of the one-hour roof/ceiling assembly construction that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin. Findings on 05/25/2016: The sheet-rock ceiling is damaged due to water migration from a past roof leak in two ceiling locations in the Trash Room/East Wing.	C 189	C199-1 It was found that two mechanical exhaust fans within the facility were not functioning properly. Parts to repair these exhaust fans were purchased on Friday, June 3, 2016 by the office administrator. Facility maintenance repaired both non-functioning exhaust fans on Thursday, June 9, 2016. Facility maintenance will be responsible for checking exhaust fans to ensure they are functioning properly. When one fails, facility maintenance will be responsible for reporting it to office administrator. Parts will be ordered and facility maintenance will repair when necessary parts arrive.	6-3-16 6-9-16
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:	C 199		

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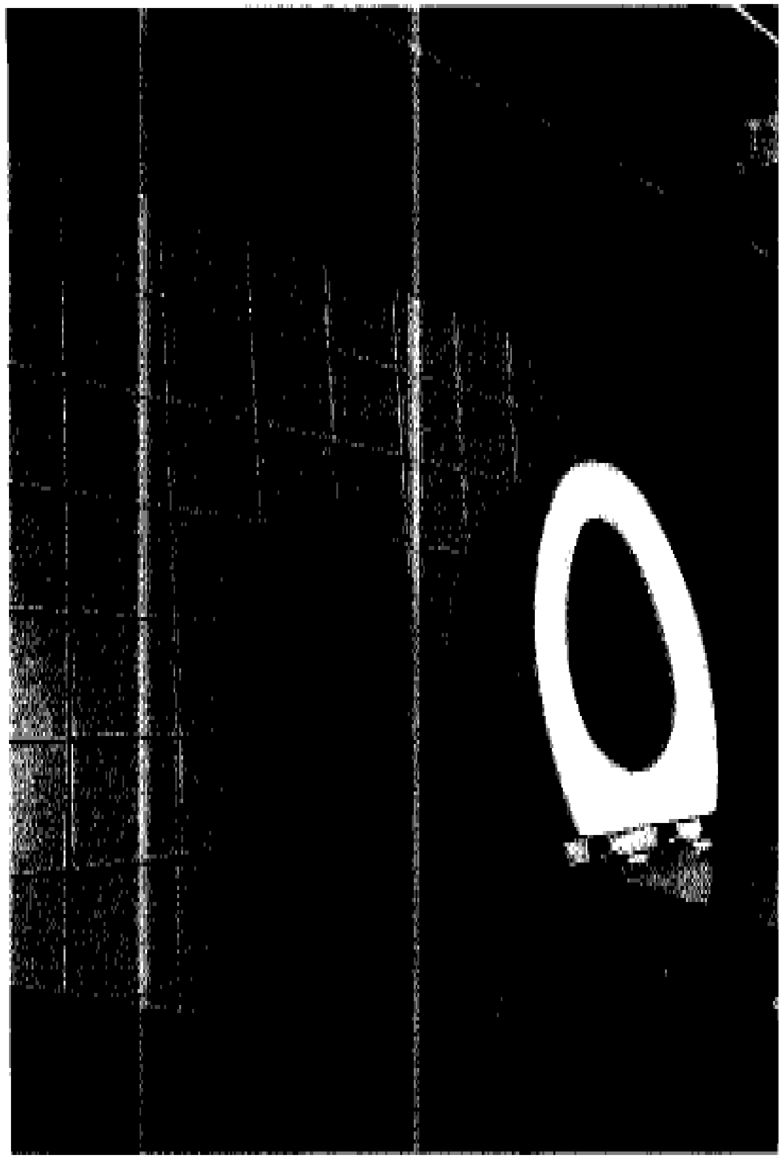
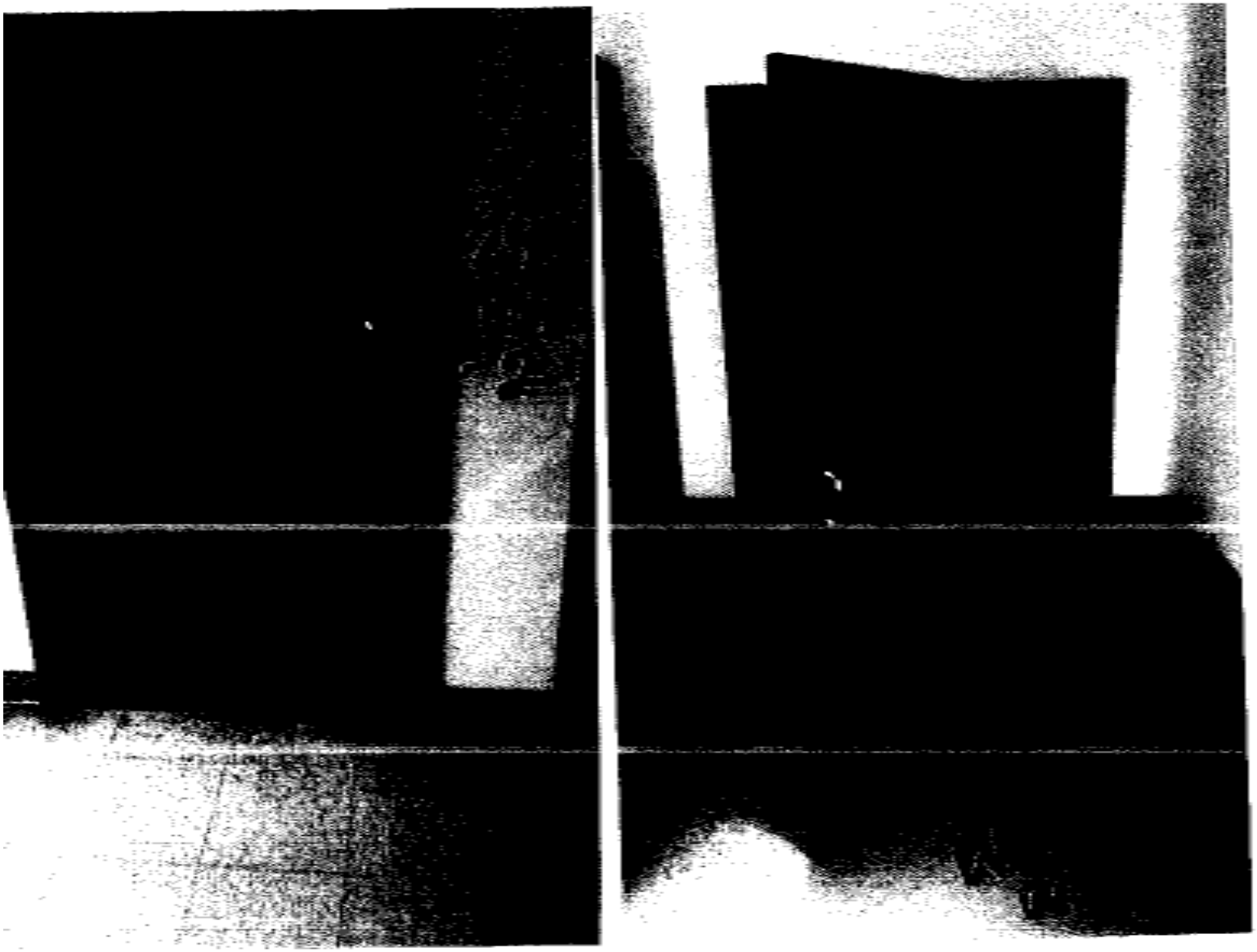
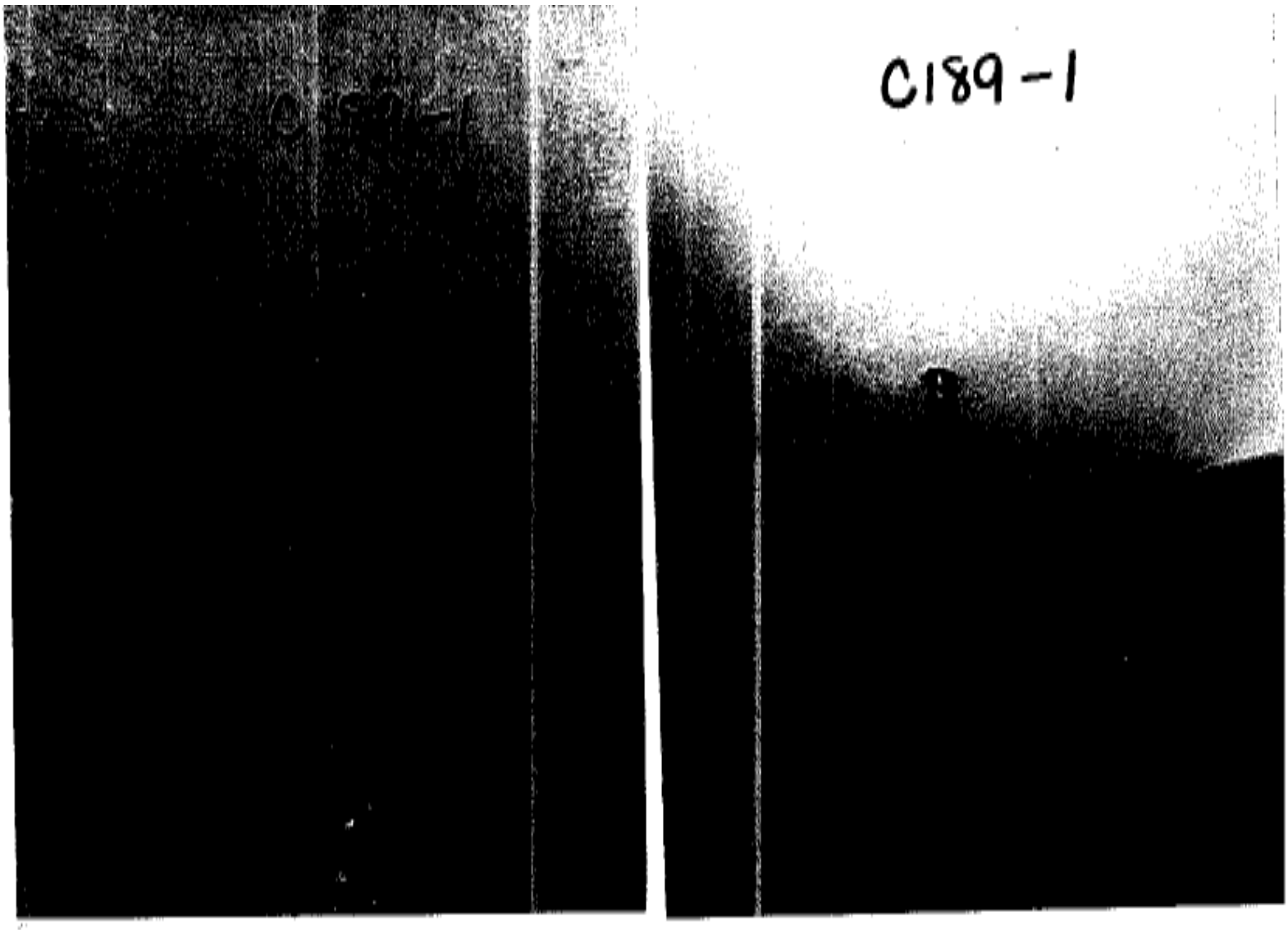
C 199	Continued From page 3 (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This 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 05/25/2016: The mechanical exhaust fans are not exhausting interior air in the following locations: (a) West Wing-Men's Shower Room (b) Kitchen pantry 2-Based on observation, the facility has not maintained and serviced the HVAC supply and return air grilles. Findings on 05/25/2016: The exhaust and return-air grilles have excessive particulate build-up at the following locations: (a) All resident bathrooms (b) Kitchen pantry (c) Dietician's office (d) Activity Director's office	C 199	C199-2 Facility housekeepers removed all excessive particulate build-up from every exhaust and return-air grilles within the building during the weekend of June 3rd, 4th and 5th. The three facility housekeepers worked together to vacuum the excessive buildup from exhaust fans and return-air grilles within each bathroom of the facility, and in kitchen pantry, dietician's office, and activity director's office. A quarterly schedule was implemented July 1st, 2016 for housekeepers to follow to ensure exhaust fans and return-air grilles are being cleaned and excessive buildup removed. The facility manager will be responsible for ensuring the housekeepers are performing these duties. (schedule and pictures provided) Administrator will monitor all areas of building, exterior and interior, monthly to assist staff in noticing needed repairs. Administrator will assist facility manager in relaying information regarding necessary repairs to facility maintenance. Administrator will follow up with facility maintenance to see that all repairs are conducted within a timely manner to ensure the safety of facility residents and staff.	6-3-16 6-4-16 6-5-16 7-1-16

Exhaust Fan Schedule				
Where-				
Room # 1	January	April	July	October
Room # 2	January	April	July	October
Room # 3	January	April	July	October
Room # 4	January	April	July	October
Room # 5	January	April	July	October
Room # 6	January	April	July	October
Room # 7	February	May	August	November
Room # 8	February	May	August	November
Room # 9	February	May	August	November
Room # 10	February	May	August	November
Room # 11	February	May	August	November
Room # 12	February	May	August	November
Room # 13	March	June	September	December
Room # 14	March	June	September	December
Room # 15	March	June	September	December
Room # 16	January	April	July	October
Room #17	January	April	July	October
Room # 18	January	April	July	October
Room # 19	January	April	July	October
Room # 20	January	April	July	October
Room # 21	January	April	July	October
Room # 22	February	May	August	November
Room # 23	February	May	August	November
Room # 24	February	May	August	November
Room # 25	February	May	August	November
Room # 26	February	May	August	November
Room # 27	February	May	August	November
Room # 28	March	June	September	December
Room # 29	March	June	September	December
Room # 30	March	June	September	December
Room # 31	March	June	September	December
Room # 32	March	June	September	December
Kitchen	March	June	September	December
Dining Room	March	June	September	December
Activity Room	March	June	September	December
Nurse's Station & Surrounding Areas/Rooms	January	April	July	October
Office	January	April	July	October
**All rooms completed 1st week of June 2016.				






C189-1