

PRINTED: 10/25/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018015	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 10/04/2016	
NAME OF PROVIDER OR SUPPLIER HICKORY VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 427 3RD AVENUE SE HICKORY, NC 28602			
(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 Ed Miller on October 4, 2016. Records indicate this facility was first licensed on 7-8-1997 for 56 residents. Based on this information we are requiring the facility to meet the 1998 rules for Homes for the Aged and Disabled - Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1998 Edition of the North Carolina State Building Code; Section 409.1 Group I Unrestrained Occupancy. Deficiencies were cited during the Survey and further action is required.	C 000			
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas, with the required individual towels and/or towel bars for each resident. Findings on October 4, 2016: a. Entire Building - in most of the Bedrooms or adjoining bathroom there was no means to hang a towel for the number of residents being served.	C 175	To INSURE FACILITY IS IN COMPLIANCE w/ Rule C-175 - All BEDROOMS w/ Adjoining BATHROOMS ARE EQUIPPED w/ TOWEL BAR Hooks for each Resident's use. CORRECTED ON 10-6-2016	10-6-16	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

NO1021

If continuation sheet 1 of 4

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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 observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, staff and visitors to fire/smoke if not contained in Room or compartment of origin Findings on October 4, 2016: a. Bulk Laundry - the fire-resistance-rated wall behind the washer had been patched with FRP board at several spots. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections and documentation required to ensure a properly working system. This could affect residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on October 4, 2016: a. Kitchen - since the semi-annual maintenance of the commercial kitchen hood's fire suppression system in May 2016, there has been no documentation of the monthly inspections.	C 189	C189. BULK LAUNDRY (1A) PLUMBER WAS CALLED & THEY ORDERED METAL BOX (AS REQUIRED). THE VENDOR SENT A FIRE RATED PLASTIC BOX WHICH HAD TO BE SENT BACK. PLUMBER ARE WAITING TO RECEIVE METAL BOX. SHOULD BE SENT ON NOV. 10, 2016. ESTIMATED COMPLETION IS PLANNED FOR 11-18-2016. TO INSURE RULE WAS MET FOR ELECTRICAL & PLUMBING. FRP & BOARD REMOVED & SHEET ROCK REPAIRED. 2A. KITCHEN ANSUL SUPPRESSION IS DONE 2 TIMES A YEAR WHICH WAS PUNCHED ON FRONT OF TAG. ON BACK ARE SPACES FOR MAINTENANCE DIRECTOR TO INSPECT MONTHLY. TO INSURE THIS IS CHECKED MONTHLY & THE SYSTEM IS WORKING PROPERLY - THIS ITEM IS ON THE MONTHLY BUILDING CHECKLIST WHICH ADMINISTRATOR CHECKS MONTHLY. CORRECTED 10-5-2016	ESTIMATE 11-18-16 COMPLETE 11-18-16 10-5-16	

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C 189	Continued From page 2 3. Based on Observation, the Building was not maintained in a safe condition. This could affect residents, staff and visitors by not containing smoke and fire in the room of origin. Findings on October 4, 2016: a. Dining Room - the corridor door had a wedge holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch. 4. Based on observation, the electrical system was not being maintained safe. Findings on October 4, 2016: a. Kitchen - the exterior light fixture was missing its shroud.	C 189	C189-3A. DINING ROOM TO INSURE COMPLIANCE w/ RULE C-189 - ALL WEDGES HAVE BEEN REMOVED FROM FACILITY. MAGNETIZED PULL DEVICES (RECOMMENDED BY CONST.) HAVE BEEN INSTALLED AS OF 10-7-2016 - (THIS WORKS GREAT) C-189-4A - KITCHEN THE LIGHT FIXTURE WAS REMOVED AND PUT OUT OF COMMISSION. THE AREA WAS COVERED WITH A CERTIFIED ELECTRICAL DATE. CORRECTIVE ACTION COMPLETED ON 10-5-2016	10-7-16
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: (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, the facility failed to provide ventilation in areas where odors are	C 199	C199-EXHAUST VENTILATION - 6X6 FIRE DUCT WAS INSTALLED TO THE AIR & DUCTED VENTILLATION SYSTEM TO INSURE NATURAL VENTILLATION FOR RESIDENT LAUNDRY ROOM	10-5-16 11-3-16

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C 199	Continued From page 3 generated or required. This could affect all residents, staff and visitors by subjecting them to odors. Findings on October 4, 2016: a. Residents Laundry - there was no exhaust ventilation system and odors are present.	C 199			