PRINTED: 10/11/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL051041	A. BUILDING: 01 B. WING	C 09/12/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLAYTON HOUSE	145 DAIRY ROAD CLAYTON, NC 27520

(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 Complaint Survey by Ed Miller on September 12, 2016. The Complaint alleged that the facility had bed bugs. Records indicate the facility was first licensed or submon March 15, 1985. The facility is licensed for 60 beds.Therefore the facility was surveyed for conformance with the 1978 edition of the North Carolina State Building Code, the 1984 Homes for the Aged and Infirm Minimum Desired Standards and Regulations and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds. The Complaint was substantiated. Deficiencies were cited during the Survey and further action is required.	C 000		
C 166	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; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, review of documentation and interview, the facility failed to provide an environment in accordance with this Rule due to the presence of bed bugs in multiple locations in the facility.	C 166	Facility will Implement a Pest Prevention maintenance Program in eliminating the Spread of Pest. Facility has implemented on 9/11/16 a daily check off form in our Pest Prevention maintenance Program. [redacted]	9/11/16

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Cornelius Kloffe — TITLE: Executive Director — (X6) DATE: 11/2/16

STATE FORM 6899 TMHL2 If continuation sheet 1 of 3

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C 166	Continued From page 1 Findings on September 12, 2016: a. Interview with the facility Administrator revealed that a current infestation of bed bugs has been identified in resident rooms 300, 302, 311, and 312. b. The source of the infestation has not been determined. c. Document review revealed that a pest control company treated for bed bugs starting on December 31, 2015 and have treated the following rooms since December 31, 2016: 101, 102, 103, 104, 202, 203, 204, 205, 206, 208, 209, 211, 213, 215, 300, 302, 311, 313. e Further interview with Administrator and telephone call to Regional Director of Operations (September 13, 2016) revealed that the facility has no writen bed bug protocol. The Administrator verbally indicated that (1) staff have been incorporating some extra cleaning into their daily routine since the re-discovery of bed bugs in December. (2) Several wooden head boards have been replaced with metal ones. (3) Adjustment holes in remaining wooden headboard have been sealed. In addition(4) the wooden headboards have a groove, securing the edge stripping that has been identified as a place where bed bugs could be harboring. These grooves where being treated and sealed. (5) Some holes in ceiling had been sealed. (6) The amout of Furniture being brought in from the outside is being limited. and (7) Clothes and other items able to be laundered is being treated in the clothes dryer before being allowed into the facility. f. Further interview with Administrator revealed the facility is not taking any additional monitoring or protection measures. Direct observation revealed no mattresses were encapsulated and there are no climb up traps. There was no	C 166	Management Implemented a bed bug Protocol log for any activity of bed bug. M. Techs and aides are to document any activity and notify MCM or E.D. of such sitings. This was created on 9/11/16	9/11/16

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C 166	Continued From page 2 documented inspections by staff to identity new activity. There was no indication that a thorough cleaning had been performed on affecterd rooms and furniture on a daily bases. g. Direct observation of Resident rooms on 09/12/2016 revealed molted exoskeleton on the bed rail in Bedroom 302. Molted exoskeleton in upholstered chairs in Bedrooms 203 & 205. One mattress had small area of feces spots concentrated near the corner guard at the left foot of the bed in Bedroom 202.	C 166		