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
	HAL070006	A. BUILDING: 01 B. WING	12/06/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HERITAGE CARE OF ELIZABETH CITY	100 TIMMERMAN DRIVE ELIZABETH CITY, NC 27909

(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 Construction Section Biennial Survey by Ed Miller conducted on December 6, 2016. Records indicate this facility was first licensed as a Home for the Aged on February 1, 1984. The facility is currently licensed for a total capacity of sixty 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) Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1984 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited that require a Plan of Correction.	C 000		
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 facility failed to keep walls, ceilings, floors or floor coverings and furniture clean and in good repair. Findings on December 6, 2016: a. Shower Room near Bedroom 129 - the texture ceiling was in disrepair and falling down.	C 164	Textured ceiling has been repaired Ceilings will be monitored weekly by maintenance staff and repaired as necessary.	1-15-17

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Administrator — (X6) DATE: 1-13-17

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C 164	Continued From page 1 b. Corridor between Bedrooms 133 &131 - the floor tiles were stained.	C 164	Floor tiles are stained as a result of an adverse chemical reaction with floor stripper and cannot be cleaned.	1-15-17
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, the Building was not maintained free of hazards, because the portable medical oxygen cylinders were not being properly handled/stored. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on December 6, 2016: a. Chart Room - two portable medical oxygen cylinders were stored standing up not secured to the structure. Deficiency corrected before Construction Surveys departed the site.	C 166	As stated in report O2 cylinders were moved to and stored in correct storage unit. This will be monitored by nursing staff daily to assure proper storage	1-15-17
	2. Based on observation, the Building plumbing equipment was not maintained in a safe manner by not have properly working or installed parts. This could affect all residents, staff and visitors by not protecting them from falls or injury due to broken or missing parts. Findings on December 6, 2016: a. Bedrooms 107 & 109 Shared Bathroom - the connection of the commode to the floor was loose.		Commode has been securely attached to floor. This will be monitored daily by housekeeping staff.	1-15-17

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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 observation, the Building was not maintained in a safe and operating condition, because the fire rated doors in a Firewall did not close completely and latch in order to contain smoke/fire. This could affect all residents, staff and visitors by not containing smoke/fire in the fire compartment of origin. Findings on December 6, 2016: a. A Wing Firewall, - the back leaf of the cross-corridor doors did not latch when the fire alarm hold open devices were released. 2. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff and visitors if they could not promptly find their way to an exit during an emergency. Findings on December 6, 2016: a. Front Entrance - the exit sign did not illuminate on backup power when tested. b. A Wing Firewall C Wing Side - the exit sign did not illuminate on backup power when tested. 3. Based on observation, the electrical system was not being maintained safe.	C 189	latch has been repaired. This will be monitored weekly by maintenance staff. Per Pasquotank Co Fire Marshall and discussed with Ed Miller DHSR Construction this rule does not apply to this facility as entire facility is covered by diesel generator when power is out.	1-15-17 1-15-17

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C 189	Continued From page 3 Findings on December 6, 2016: a. Bedrooms 107 & 109 Shared Bathroom - The electrical power receptacle, was falling out of the wall. b. Laundry - a ground-fault circuit-interrupter (GFCI) electrical power receptacle, was missing its cover plate. c. C Wing Shower & Bathrooms - the over the sink incandescent light fixtures were missing some bulbs. By not having, bulbs in the sockets this allows access to energized components. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors did not resist the passage of smoke Findings on December 6, 2016: a. C Wing Staff Women - the corridor door was missing its latch bolt therefore the door would not latch to its frame. b. Men Public Restroom - there were three 1/4 inch or larger diameter holes through the door beside the door handle. 5. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, all to fire/smoke if not contained in Room or compartment of origin Findings on December 6, 2016: a. Tub Room - the exhaust fan did not completely cover the hole penetrating the fire-resistance-rated ceiling assembly. 6. Based on Observation, the Building was not maintained in a safe condition. This could affect all by not containing smoke and fire in the room of origin. Findings on December 6, 2016: a. Bedroom 128 - the corridor door was blocked	C 189	Electrical receptacle has been correctly attached. Cover plate has been replaced. Light bulbs have been replaced. to be monitored daily by housekeeping and maintenance staff A new knob has been put on door that latches as required. 1/4 inch holes in door have been repaired. To be monitored by maintenance staff New fan has been installed that covers all openings	(-157) (-157) (-157)

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C 189	Continued From page 4 open with a bed and will not close.	C 189		
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 and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff and visitors by preventing the exhausting of odors. Findings on December 6, 2016: a. B wing Mop Room - the exhaust ventilation system did not work, allowing a build-up of odors.	C 199	Bed moved to allow door to close to be monitored by nursing Exhaust fan replaced. To be monitored by housekeeping staff	1-15-17 1-15-17