

PRINTED: 04/10/2017
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL036019	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____		(X3) DATE SURVEY COMPLETED 03/30/2017
NAME OF PROVIDER OR SUPPLIER MORNINGSIDE OF GASTONIA		STREET ADDRESS, CITY, STATE, ZIP CODE 2755 UNION ROAD GASTONIA, NC 28054			
(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 Construction Section Biennial Survey report by Frank Strickland and Ed Miller on 03/30/2017: This facility was first licensed on 06/27/1997 as a Home for the Aged. The facility is currently licensed for 105 beds, including a 28 bed Special Care Unit. Therefore, this facility is required to meet the 1996 Rules for the Licensing of Adult Care Homes (Homes for the Aged and Family Care Homes,) applicable portions of the 2005 Rules 10A NCAC 13F for Adult Care Homes of Seven or More Beds and the 1996 North Carolina State Building Code with emphasis on Section 409, Group I-2, Unrestrained. Deficiencies have been cited and a Plan of Correction is required.	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, this facility has failed to keep ceiling return-air grilles free of dust and particulate build-up. Finding on 03/30/2017: The following locations have return-air grilles that is clogged with dust, grease and excessive	C 164	Maintenance Dir. cleaned the return air grills mentioned. The Executive Director (ED) and Maintenance Dir. will identify any other return air grills requiring cleaning. The Maintenance Dir./designee will check return air grills monthly to determine cleaning or other needs and document findings and actions. The ED will review the documentation and complete observations each month.	5-1-17	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6885

05V021

If continuation sheet 1 of 4

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C 164	Continued From page 1 particulate. (a) Kitchen return-air grilles (grease build-up) (b) Small Dining Hall/First Floor return-air grilles (dirt and particulate build-up) 2-Based on observation, this facility has failed to maintain the ceiling construction and finishes in operational areas. Findings on 03/30/2017: The lay-in ceiling tile the Main Kitchen/First Floor is stained, cracked and damaged.	C 164	Maintenance Dir. will repair or replace ceiling tiles in the Main Kitchen. The Maintenance Dir./designee will check ceiling tiles monthly to determine cleaning or other needs and document findings and actions. The ED will review the documentation and complete observations each month.	5-1-17	
C 165	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, this facility failed to be maintained in a clean manner free from hazards. Finding on 03/30/2017: The gas range in the Main Kitchen/First Floor has excessive grease build-up on the burner grates and debris has fallen down into the stove potentially becoming a fire hazard.	C 165	Food and Beverage Dir. or designee will complete deep cleaning of the gas range. Dining staff will be re-trained on cleaning responsibilities including the gas range. The Food and Beverage Dir. will review cleaning documentation and make observations daily while in the community, to monitor compliance. The ED will review the documentation and complete observations each month.	5-5-17	
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189			

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C 189	Continued From page 2 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 (a) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1-Based on observation, this facility failed to maintain the building and fire safety equipment in areas required to have a fire rating prescribed by the North Carolina Building Code for the building type of construction and use. Findings on 03/30/2017: The fire-proofing has been removed or disturbed at the following locations due to roof repair and new shingle installation: (a) Main Electrical Equipment Room/First Floor (b) Storage Room-Second Floor (c) Transformer Room/Second Floor 2-Based on observation, this facility has failed to be maintained in a safe and operating condition the emergency lighting. This could affect all residents, staff and visitors if the egress pathways were not illuminated during a power outage. Findings on 03/30/2017: The emergency wall light that are located at the following locations did not illuminate when tested in the emergency mode: (a) Jefferson Room/First Floor (b) Room 103/First Floor (c) Large Dining Hall/South Side/First Floor (d) Sunroom North Wall/Second Floor (e) Room 240/Second Floor	C 189	The Maintenance Dir. will work with appropriate vendor to replace fire-proofing in the main electrical equipment room, the second floor storage room, and the second floor transformer room. The Maintenance Dir./designee will check maintenance rooms and storage rooms quarterly for any hazards and document findings and actions. The ED will review the documentation and complete quarterly observations. The Maintenance Dir. has repaired the emergency wall lights that did not illuminate in the emergency mode. The Maintenance Dir./designee will check all emergency and exit lights monthly to determine needs and document findings and actions. The ED will review the documentation and complete observations each month.	5-13-17 5-1-17

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C 189	Continued From page 3 (f) Stair Tower A/Second Floor 2-Based on observation, this facility has failed to be maintained in a safe and operating condition the emergency exit signs. This could affect all residents, staff and visitors if the egress pathways were not illuminated during a power outage. Findings on 03/30/2017: The exit sign is not illuminated at the Activity Room/Second Floor. 3-Based on observation, this facility has failed to provide a clear view of exit signage in a safe manner. Findings on 03/30/2017: The exit signs that are located at the First Floor Interior Courtyard exits are obstructed by awnings. 4-Based on observation, this facility failed to maintain the plumbing fixtures, Finding on 0/30/2017: The toilet is not secured to the floor in Room 118.	C 189	The Maintenance Dir./designee has repaired the exit sign at the second floor activity room. The Maintenance Dir./designee will check all emergency and exit lights monthly to determine needs and document findings and actions. The ED will review the documentation and complete observations each month. The Maintenance Dir. has changed the awning so the interior courtyard exit signs can be seen. The Maintenance Dir./designee will check all emergency and exit lights monthly to determine needs and document findings and actions. The ED will review the documentation and complete observations each month. The Maintenance Dir. secured the toilet in Rm 118. The Maintenance Dir./designee will check all toilets quarterly to determine needs and document findings and actions. The ED will review the documentation and complete observations each quarterly.	5-1-17 5-1-17 5-1-17	