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
	HAL086002	A. BUILDING: 01 B. WING _____	06/21/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COLONIAL LONG TERM CARE FACILITY	340 SNOWHILL DRIVE MOUNT AIRY, NC 27030

(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 Suzanna conducted on June 21, 2017. Records indicate this facility was first licensed in 1966. The facility is currently licensed for fifty-four Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and the 1971 Rules for Licensing of Adult Care Homes of Seven or More Beds.	C 000		7-27-17
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a safe condition. Findings on June 21, 2017: a. Outside of Room 24, there is an open cast iron pipe protruding from the ground that poses a tripping hazard. 2. Observations revealed that the exterior facade was not maintained in good condition. Findings on June 21, 2017: a. The fascia trim outside of Room 24 was pulling away from the soffit and the paint was flaking leaving the unprotected wood exposed.	C 160	The facility will immediately have a contracted person cut off and cap protruding iron pipe. The facility will assure maintenance man or his designee replaces the trim pulling away from soffit and have it repainted to protect the wood exposure. The administrator or his designee will do monthly checks thereafter to assure the outside premises are maintained and in a clean safe condition. The above findings will be fixed and back in a safe conditions as of 7-27-17.	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Mark Payne	Administrator	7-25-17

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C 164	Continued From page 1	C 164		7-27-17
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 furnishings were not maintained in good repair. Findings on June 21, 2017: a. Room 3 - the hinge on the right hand closet door was broken making the door difficult to operate. b. Room 3 - the closet hanging rod was sagging heavily in the middle. 2. Based on observation, the floors were not kept clean and in good repair. Findings on June 21, 2017: a. Room 3 - the base tile was broken off behind the toilet. 3. Based on observation, the walls were not kept clean and in good repair. Findings in June 21, 2017: a. Bath by Room 12 - the corner trim on the partition wall between the toilets was pulling away from the wall at the base.	C 164	The facility will immediately have contracted person or maintenance man repair hinge on the right hand closet door in room 3, the closet hanging rod in room 3 will be replaced, and in room 3 the base tile behind the toilet will be repaired. The corner trim in the bathroom beside room 12 will be replaced and in good repair. The administrator or his designee will do monthly checks thereafter to assure all furnishings are maintained in good repair. The above findings will be fixed and back in a safe conditions as of 7-27-17.	

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C 166	Continued From page 2	C 166		
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. Observations revealed that the facility was not maintained free of hazards. Findings on June 21, 2017: a. Room 6 - multiple power chords were strung together creating a fire hazard. 2. Observations revealed that the corridors were not maintained free of hazards. Unsecured railings could result in injury to the residents. Findings on June 21, 2017: a. The handrail between Rooms 15 and 17 was not secure to the wall.	C 166	The facility will immediately remove power chords from room 6. The maintenance man will immediately assure the handrail between rooms 15 and 17 is secured and fastened to the wall. The administrator or his designee will do monthly checks thereafter to assure the facility is free of hazards and corridors are maintained free of hazard. The above findings will be fixed and free of any hazard as of 7-27-17.	7-27-17
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)	C 189		

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C 189	Continued From page 3 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, there is a failure to maintain the facility's fire safety equipment in a safe operating condition. To be able to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops. Findings on June 21, 2017: a. Men's Staff Bath - the door was damaged at the door knob leaving a small gap between the door and door frame. b. Room 24 - the door hardware plate is loose and the door will not close. c. Room 23 - the door is sticking at the bottom and does not close completely. 2. Based on observation, the facility failed to maintain all fire safety equipment in a safe and operating condition. Findings on June 21, 2017: a. The Exit sign at the living room exit was not lit and did not light on test. The battery was replaced at the time of this survey. b. The Exit sign at the corridor exit by Room 1 was not lit. The battery was replaced at the time of this survey. c. The corridor emergency light outside Room 8 was not working at the time of this survey. d. The heat detector in the half bath by Room 10 was dangling by its wires. This item was corrected at the time of survey. 2. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition.	C 189	The facility will immediately have contracted person or maintenance man fix the men's staff bath door so there will be no gap between the door and door frame. The door hardware plate on room 24 will be fixed to assure door will close. The door in room 23 will be fixed to assure the door closes properly. The two exit signs that were not lit had batteries replaced at the time of survey. The corridor emergency light outside room 8 will be fixed by maintenance man to assure working properly. The heat detector in the half bath by room 10 was dangling by its wires and was corrected at the time of survey. The fire extinguisher in the outside storage unit will be inspected immediately. The metal housing for the baseboard heater in the bath by room 12 will be fixed by maintenance man. The drain in the exterior boiler room will be unclogged immediately, along with the rust at the bottom of the heater casing and exterior door will be fixed and repaired. The maintenance man will assure the cross corridor is free from sticking and be repaired. The administrator or his designee will do monthly checks thereafter to assure the facility maintains the fire safety equipment in a safe operating condition, that the fire safety equipment is inspected to assure it is in a safe operable condition, the electrical equipment is maintained in a safe condition, and making sure paths of egress are easily accessible. The above findings will be fixed and free of any hazard as of 7-27-17.	7-27-17

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C 189	Continued From page 4 Occupants of the facility could be effected if fire safety equipment did not operate when needed to provide fire protection. Findings on June 21, 2017: a. The fire extinguisher in the outside storage unit was not inspected. 3. Based on observations, the electrical equipment was not maintained in a safe condition. Findings on June 21, 2017: a. The metal housing for the baseboard heater in the bath by Room 12 was heavily damaged. The metal was bent and not secure to the unit. The metal edges could cause injury and the heating elements are no longer protected which could result in injury. Interview with Staff revealed that they were in the process of replacing the covers. b. Exterior boiler room - the drain for the exterior room was clogged and the room was flooded. Rust was observed on the bottom of the hot water heater casing and along the bottom of the exterior door. 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors that do not open easily in the path of egress can deter residents and staff from evacuating safely in the case of a fire or other emergency. Findings on June 21, 2017: a. The cross corridor door was sticking and required excessive force to open.	C 189		
C 195	Hot Water System	C 195		

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C 195	Continued From page 5 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 hot water temperature at all fixtures used by residents was not maintained between 100 degrees F and 116 degrees F. Findings on June 21, 2017: a. Two of three water temperatures taken did not meet the minimum of 100 degrees F. Interview with Staff revealed that due to the location of the water heater, the fixtures most remote from the hot water heater took longer to heat up and that they maintained a minimum of 100 degrees F.	C 195	The facility will immediately have contracted person or maintenance man assure the hot water is fixed and reaches a minimum of 100 degrees F in the appropriate time and does not exceed 116 degrees F. The administrator or his designee will do monthly checks hereafter to assure the hot water reaches a minimum of 100 degrees F and does not exceed 116 degrees F at all fixtures used by residents. The above findings will be fixed and back in a safe conditions as of 7-27-17.	7-27-17