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
	HAL082012	A. BUILDING: 01 B. WING	07/06/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUTUMN WIND ASSISTED LIVING OF ROSEBC	507 PINEWOOD STREET ROSEBORO, NC 28382

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on July 6, 2017. Records indicate this facility was first licensed on August 23, 2004. The facility is currently licensed for 40 Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Bed sand applicable portions of the 2002 Edition of the North Carolina Building Code, Institutional Occupancy, and the 2004 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Observations revealed that the facility was utilizing two of the HC bathrooms as storage. Findings on July 6, 2017: a. The Men's bathroom on the 100 hall and the right HC bathroom on the 200 hall had several wheelchairs and walkers stored in the room.	C 135 CR	All walker/wheelchair removed stored in proper areas.	7/27/17
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL	C 160		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Denise Naylor TITLE: ADM (X6) DATE: 7/27/17

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C 160	Continued From page 1 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. Based on observation, the outside premises were not maintained in a safe condition. Pests that sting or bite can cause injury or illness to the Residents. Findings on July 6, 2017: a. Exit from 200 Hall - there is a large, active wasp nest in the corner of the ceiling to the left of the door.	C 160	Wasp were removed with wasp spray and nest removed	7/31/17
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 facility failed to maintain the ceilings in good repair. Findings on July 6, 2017: a. Corridor outside of sitting room - the ceiling has large, yellow water stains and the finish is damaged. There is a 4" diameter stain with black	C 164		

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C 164	Continued From page 2 mildew spots near the sprinkler head. Interview with staff revealed that an HVAC line had burst and caused the damage. b. Beauty Salon - the ceiling is spotted with black stains that appear to be mildew stains between the air supply and the door. 2. Based on observation, the facility did not maintain the doors in good repair. Findings on July 6, 2017: a. The door separating the kitchen from the dining was dragging on the frame making it difficult to close.	C 164	Cleaned and painted Cleaned and painted Adjusted door so it could close freely	7/19/17 7/23/17 7/21/17
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 facility was not maintained free from hazards due to oxygen bottles that are stored without any means of restraint to prevent them from falling or being knocked over. Oxygen bottles that are improperly stored may present a danger to the occupants of the facility. Findings on July 6, 2017: a. Room 107 - one of the oxygen bottles was stored standing upright and without any means of	C 166		

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C 166	Continued From page 3 restraint to prevent them from falling over. b. Med Room - there was a small oxygen bottle behind the door in an upright position without any means of restraint to prevent it from falling over. c. Oxygen Storage - there were several oxygen bottles stored standing upright and without any means of restraint to prevent them from falling over. There were several small canisters laying on their sides in the rack as the rack was too large to properly secure the canisters.	C 166	(a) Removed loose tanks and stored in proper area (b) Stored oxygen in proper containe to keep from or prevent falling (c) Stored in proper containers to prevent falling over	7/8/17 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) 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 systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps or holes in fire resistant rated ceilings could affect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Findings on July 6, 2017: a. Room 100 - there is a hole in the ceiling at the sprinkler head. b. Room 204 bath - the fan is not positioned over the opening leaving gaps in the ceiling around the	C 189 a-	Caulked and repaired	7/19/17

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C 189	Continued From page 4 perimeter of the fan. c. 200 Hall - HC bath left - the smoke detector is not secure leaving an opening at the ceiling. d. 200 Hall - there are two nail pops along the corrider wall outside of Room 205. e. Soiled Linen - there is a hole at the sprinkler head. f. Laundry Room - the sprinkler heads have dropped leaving openings in the ceiling at the heads. g. Clean Linen Room - a fire sprinkler head escutcheon has dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. h. Beauty Salon - the ceiling around the sprinkler head was damaged and repairs have left a gap in the fire resistant rated ceiling. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors that open to corridors are required to completely close and latch in the event of a fire. The occupants in the smoke compartment could be effected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on July 6, 2017: a. Room 209 - the corridor door does not latch. 3. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device that is used to keep a door open is an impediment to quickly closing a door to aid in containing smoke and/or fire. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin.	C 189 b c d e f g h a	Replaced fan cover Secured and caulked Caulked caulked Repaired and caulked Repaired and caulked Repaired and caulked Door was adjusted and repaired	7/19/17 7/19/17 7/19/17 7/19/17 7/19/17 7/19/17 7/23/17 7/19/17

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C 189	Continued From page 5 Findings on July 6, 2017: a. The kitchen corridor door was propped open with an unapproved wedge. 4. Based on observation the facility's emergency equipment is not maintained in operating condition. Failure to maintain life safety equipment in operating condition could effect occupants of the facility if the equipment did not operate properly to provide the required protection function. Findings on July 6, 2017: a. Med Room - when tested on battery power the wall mouted emergency light did not illuminate.	C 189	The kitchen staff was in-serviced to keep kitchen corridor door closed at all times the doors are fire doors Replaced emergency light	7/27/17 7/26/17
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 (a) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility failed to provide the required exhaust ventilation. Exhaust	C 199		

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C 199	Continued From page 6 ventilation is required to remove objectionable odors or chemical vapors from the facility. Occupants of the facility could be effected if odors or fumes were to permeate beyond the areas or rooms where exhaust fans are required. Findings on July 6, 2017: a. Room 105 bath - the exhaust fan was not working. b. 100 Hall, Men's bath - the exhaust fan was not working. c. Room 207 bath - the exhaust fan was not working. d. Beauty Salon - the exhaust fan was not working.	C 199	a Repaired b Contacted electrician to repair fan on 7/24/17 # parts may need to be ordered c Replaced fan motor d Cleaned and repaired	7/27/17 8/18/17 7/20/17 7/28/17