

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 1D B. WING: _____		(X3) DATE SURVEY COMPLETED 07/20/2017
NAME OF PROVIDER OR SUPPLIER TRINITY OAKS CONTINUING CARE RETIREME		STREET ADDRESS, CITY, STATE, ZIP CODE 728 KLUMAC ROAD SALISBURY, NC 28144			
(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 Fay conducted on July 20, 2017. Records indicate this facility was first licensed on February 19, 1993. The facility is currently licensed for 20 Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1991 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1991 Edition of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies were noted which require a Plan of Corrections.	C 000	The four stained ceiling tiles were replaced 7/25/17 Maintenance, Nursing staff and Housekeeping will monitor ceiling daily for water damage. Tiles will be replaced within 24 hours.		
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. Observations revealed that the ceilings were not maintained in good repair. Findings on July 20, 2017: a. Spa - four of the ceiling tiles along the back wall had large water stains.	C 164	Ceilings will be monitored quarterly for any water damage. PM quarterly review of all ceilings.		

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

William M. Johnson

TITLE

Campus Director

(X6) DATE

8/12/17

STATE FORM

6888

7/9621

If continuation sheet 1 of 3

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C 189	Continued From page 1	C 189	Electrical room fire caulking was replaced on 7/26/17	
C 189	Building Equipment Maintained Safe, Operating	C 189		
	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 building's fire safety equipment systems in a safe condition. Holes or gaps at penetrations in the fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on July 20, 2017: a. Electrical Room - the fire caulking had deteriorated and was falling off around the pipe penetrations. One of the seals was cracked and separating at the ceiling. One conduit penetrated the ceiling and had not been caulked to seal the opening. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Fire resistant rated cross corridor doors are required to close completely and latch in the event of a fire. The occupants in the smoke compartment could be effected if the doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin.		Will inspect all firewalls & ceiling for penetrations and proper fire caulking. Any found will immediately be replaced. Maintenance will inspect all fire walls & ceilings quarterly. Maintenance will have preventive maintenance quarterly Review of all fire caulking. Fire door latch repaired 7/26/17 Maintenance will inspect each fire door for proper latching on Wednesday when testing generator & with each monthly fire drill. Maintenance will monitor each door for proper latching at each monthly fire drill.	

Checklist for each monthly fire drill will include proper closing & latching of doors.

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C 189	Continued From page 2 Findings on July 20, 2017: a. Upon activation of the fire alarm the fire resistant rated cross corridor pair of doors had one door that failed to completely close and latch when released from its magnetic hold open device.	C 189			