

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL049016	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/24/2017
NAME OF PROVIDER OR SUPPLIER OLIN VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 999 TABOR ROAD OLIN, NC 28660		
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C 000	Initial Comments Report of a Biennial Construction Survey by Suzanna Fay conducted on August 24, 2017. Records indicate this facility was originally licensed on April 1, 1968. There was a later addition to the building on May 4, 1987 that increased the total capacity to 64 beds. Based on this information, the older portion of the facility was surveyed using the 1967 NC Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds. The newer portion of the building, to the rear and left of the fire wall nearest the kitchen, was reviewed using the 1978 NC State Building Code, the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds Physical plant deficiencies were noted which require a plan of correction.	C 000		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Observations revealed that hand grips were not installed at all tubs, showers and commodes accessible to residents.	C 133		

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

TITLE

(X6) DATE

Administrator

9/20/17

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C 133	Continued From page 1	C 133		
	Findings on August 24, 2017: a. Bath 4 - the commode did not have hand grips. b. Bath 2 - the shower did not have hand grips.		There have never been hand grips at these locations. However, it is agreed that hand grips are necessary for safety reasons. Hand grips in items a. and b. will be installed by 10/9/17.	
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 did not maintain walls in good repair. Findings on August 24, 2017: a. Room 15 - there was a large hole at the base of the closet wall adjacent to the bathroom. 2. Observations revealed that the facility did not maintain furnishings in good repair. Findings on August 24, 2017: a. Bath 6 - the screws were missing on the right side of the sink panel causing it to hang loose and unsecured. 3. Observations revealed that the facility was not maintained free of chronic unpleasant odors. Findings on August 24, 2017:	C 164	Hole identified in Item a. will be repaired by 10/9/17. Maintenance staff has been instructed to routinely check areas prone to developing holes and repair them immediately. Sink panel repaired on 9/1/17. Housekeeping staff instructed to notify maintenance staff immediately of any issues concerning keeping the restrooms in good repair.	

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C 164	Continued From page 2	C 164		
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 equipment was not maintained in a hazard free condition. Faulty and unsecured equipment could affect the physical safety of the residents. Findings on August 24, 2017: a. Room 29 - the towel bar by the sink is loose. b. Bath 6 - the flanges on the toilet grab bar were missing leaving hard, sharp metal edges exposed. c. Bath 4 - the toilet was not secure at the floor allowing it to move. d. Bath 4 - a towel bar was broken or removed at the tub leaving the metal bracket which has a hard, sharp edge. d. Bath 3 - there were several brackets left mounted to the walls with hard, sharp edges at the tub. 2. Observations revealed that one of the vinyl floors in a shared toilet room was not maintained in a safe condition. Curling and buckling floors pose a trip hazard for the residents using the	C 166	Floor cleaned and waxed on 9/14/17. Restroom habits of resident(s) in Room 10 were evaluated. Urinals and instruction were provided to assist resident(s) in prevention of restroom accidents. Item a: Repaired on 9/15/17. Item b: Sharp edges removed by maintenance staff on 9/15/17. Items c,d,e: Will be repaired by 10/9/17. All staff instructed to notify maintenance of immediately of any issues in restrooms in effort to keep restrooms in good working order.	

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C 166	Continued From page 3 bathroom. Findings on August 24, 2017: a. Bath at Room 15 - the vinyl floor has rolled and puckered creating ridges across the floor.	C 166	Maintenance staff will replace vinyl by 10/9/17. All staff instructed to notify maintenance team immediately of any issues in keeping floors in good repair.	
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 facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on August 24, 2017: a. The emergency light at the office door was not working. b. The emergency light by Room 21 was not working. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if exit signs indicating the location of exit paths could not be seen in the event of an emergency evacuation.	C 189		

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C 189	Continued From page 4 Findings on August 24, 2017: a. The exit light/sign at the exit by the office did not light when the battery was tested. b. The exit light/sign at the cross corridor doors by Bath 6 did not light on battery test. c. The directional exit light/sign by the large activity room did not light on battery test. d. The exit light/sign at the door by the med room did not light on battery test. e. The exit light/sign by the small fire door did not light on battery test. f. The exit light/sign at the door to the front porch did not light on battery test. g. The lights were not working in the exit lights at the dining room doors. 3. Based on observation electrical equipment is not being maintained in safe operating condition. Failure to maintain electrical equipment in safe and operable condition could cause injury to the occupants of the facility. Findings on August 24, 2017: a. Room 29 - the receptacle cover at the A/C unit was broken. b. Maintenance Storage - the electrical outlet on the corridor wall did not have a cover plate. 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. 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. Findings on August 24, 2017: a. Room 8 - the corridor door did not latch and close.	C 189	All Exit lights/signs were repaired or replaced on 8/29/17. Maintenance staff instructed to check all exit lights/signs on a monthly basis. Broken or missing cover plates replaced on 8/28/17. All staff instructed to report any issues to maintenance staff immediately in an effort to maintain good repair to these items. Item a: See next page (Page 6)	

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C 189	Continued From page 5 5. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. 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 August 24, 2017: a. The right leaf on the cross corridor doors by Room 25 did not latch completely when tested. 6. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire 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 August 24, 2017: a. The fire extinguisher at the front door had not been inspected as there was no inspection tag and the extinguisher appeared to have been discharged.	C 189	Door knob replaced on 9/19/17. All staff instructed to report any issues to maintenance immediately in an effort to keep items in good working order. Cross corridor doors repaired on 8/28/17 to latch properly when magnets are released. Maintenance staff instructed to check doors quarterly. Replaced on 9/14/17 by fire extinguisher service provider. Provider was instructed to add our location to the routine maintenance schedule rather than the "as needed" schedule.	
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;	C 199		

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C 199	Continued From page 6 (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. Observations revealed that the exhaust ventilation was not maintained at a rate of two cubic feet per minute per square foot in all rooms with mechanical exhaust. This can lead to a build up of odors and moisture which could be unpleasant and lead to physical damage to the facility. Findings on August 24, 2017: a. Bathroom 7 - the exhaust fan was not working. b. Room 22 toilet - the exhaust fan was not working. c. Room 15 toilet - the exhaust fan was not working.	C 199	Fan motors were ordered on 9/15/17. Items will be repaired upon receipt of the ordered items and by 10/9/17. Maintenance staff instructed to check exhaust in all bathrooms monthly.	