

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018023	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/23/2017
NAME OF PROVIDER OR SUPPLIER AUSTIN ADULT CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 511 BUMGARNER INDUSTRIAL DRIVE CONOVER, NC 28613		
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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on August 23, 2017. There are deficiencies from the Biennial Follow Up Construction Survey that remain to be corrected and two new deficiencies were cited that need attention. Therefore, further action is required.	{C 000}		
{C 100}	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. Based on observation, the outside grounds were not maintained in a safe condition. This affects the safety of the residents and staff. Findings on August 23, 2017: a. An open gutter downspout drain pipe was observed at the back corner outside of the med. room. The sidewalk at the pipe was broken and pulling away from the building. These two items pose a possible tripping hazard. Interview with Staff revealed that the Owner had begun repairs on the front walks and had not yet started on the back. b. The sidewalk leading to the basketball goal was broken and cracked creating a possible tripping hazard. Interview with Staff revealed that the Owner had begun repairs on the front walks	{C 100}	Sidewalks + downspouts to be repaired by 11/1/17	

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

TITLE

(X6) DATE

STATE FORM

8899

VUMJ22

If continuation sheet 1 of 10

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(C 160)	Continued From page 1 and had not yet started on the back. c. One of the concrete covers for the grease pits had broken leaving a large well approximately 2 cubic feet in size. The grease pits are not near sidewalk or resident traffic area and are therefore a low risk for residents to trip over or fall into. New Deficiency on August 23, 2017: a. A section of the gutter along the back right corner of the facility is falling off of the building. Two residents expressed concern that the gutter was going to fall off and hit someone.	(C 160)	will make grease pit tops to cover pit	11/1/17
(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. Observations revealed that the facility failed to maintain the ceilings in good repair. Findings on August 23, 2017: a. The corridor ceiling outside of Room 105 was bowed and the finish was cracked. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. b. The ceiling of the Women's bath was stained and spotted with mold. Interview with Staff revealed that the Owner had completed some	(C 164)	will repair sheetrock & ceiling will be stain wood trim & paint	11/1/17 10/20/17

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(C 154)	Continued From page 2 repairs, but had not finished all of the work. c. The ceilings of the Women's bath was cracked and flaking around the HVAC vent. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. 2. Observations revealed that the walls were not maintained in good repair. Findings on August 23, 2017: a. Men's bath - the paint was flaking off the walls behind the toilets. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. 4. Observations revealed that the floors were not kept clean and in good repair. Findings on August 23, 2017: a. Men's bath-the tile along the tub edge was broken, cracked and there was an accumulation of dirt in the openings. The base surrounding the tub was missing. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. b. The VCT flooring is stained and heavily scuffed throughout the facility. The tile adhesive is seeping through the seams throughout the rooms. The living room tile has scratch marks across the length of the room. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work.	(C 154)	to Repair Cracks around HVAC Vent to Scrape & repaint walls in Mens Bath Will Repair tile in Mens bath to prevent gathering dirt, will replace base moulding at tub Will Repinish flooring in Hallways & Living Room/ Dining	11/1/17. 11/1/17. 11/1/17. 11/1/17.
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 166		

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C 166	Continued From page 3 (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: New deficiency: 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 August 23, 2017: a. Six unrestrained oxygen bottles were observed in the Med Room.	C 166	<i>O2 bottles were restrained using appropriate storage</i>	<i>10/1/17</i>
(C 173)	Housekeeping-Bedroom Furnishings, Bed SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (1) A bed equipped with box springs and mattress or solid link springs and no-sag innerspring or foam mattress. Hospital bed appropriately equipped shall be arranged for as needed. A water bed is allowed if requested by a resident and permitted by the home. Each bed shall have the following: (A) at least one pillow with clean pillow case; (B) clean top and bottom sheets on the bed, with bed changed as often as necessary but at least	(C 173)		

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(C 173)	Continued From page 4 once a week; and (C) clean bedspread and other clean coverings as needed; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that two beds were not maintained in good repair. This affects one Resident. Findings on August 23, 2017: a. Room 108-the bed nearest the window had a broken foot at the bottom left post that was sitting on a broken piece of concrete block. At the time of the follow up survey, the block piece was sitting under the bed and it appeared that the right post had been altered to even up the bed. The footings were missing on the bed legs. Interview with Staff revealed that the resident was in the habit of bringing in broken pieces of concrete and was not aware that alterations had been made to the bed.	(C 173)		
(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:	(C 189)	<i>Rm 108 Bed repaired</i>	<i>9/28/17</i>

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(C 189)	Continued From page 5 1. Observations revealed that the life safety equipment was not maintained in a safe and operating condition. This affects the safety of the Residents, Staff and Visitors. Findings on August 23, 2017: a. The emergency light outside of Room 105 was not working. Interview with Staff revealed that the Owner was responsible for completing the repairs and she was not aware that the emergency light was not repaired. b. The emergency light outside of Clean Linen was not working. Interview with Staff revealed that the Owner was responsible for completing the repairs and she was not aware that the emergency light was not repaired. 2. Based on observations, the plumbing equipment was not maintained in operating condition. Findings on August 23, 2017: a. The utility sink in the janitor closet was still clogged. The sink was full of dirty, stagnant water and housekeeping is unable to dump their dirty water into the sink. This is a sanitation and health concern for the residents and staff. 3. Observations revealed that the doors were not maintained in operating condition. Findings on August 23, 2017: a. Janitor's closet-the top hinge of the door to the closet was damaged making the door difficult to open and close. Interview with Staff revealed that the Owner was responsible for completing the repairs and she did not know why the door had not been repaired. b. Activity closet-the door hardware was not secure. Interview with Staff revealed that the	(C 189)	— E-lights replaced plumbing drain cleaner called to try to clean out drain — to be complete Janitor door repaired to prevent damage + dragging	9/29/17 9/29/17 10/3/17 9/29/17	

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(C 189)	Continued From page 5 Owner was responsible for completing the repairs and she did not know why the door had not been repaired. 4. Observations revealed that the kitchen exhaust was not maintained. Findings on August 23, 2017: a. There was still a heavy accumulation of grease and dust on and around the vent as well as on the fan blades. In an interview with Staff, it was noted that this was a cleaning issue and does not require repairs. Staff did not know why the exhaust fan had not been cleaned. 5. Observations revealed that the mechanical equipment was not maintained in operating condition. This affects the residents, staff and visitors by not providing climate control in affected areas. Findings on August 23, 2017: a. Two of four radiation dampers observed in the HVAC ducts in the ceilings had been activated. Locations include the Women's bath and the hall near the kitchen. At the time of the follow up survey, a third radiation damper in the dining room by the corridor wall was also observed to be closed. Interview with Staff revealed that the Owner was responsible for completing the repairs and she did not know why the mechanical vents had not been repaired. 6. Based on observations, the laundry equipment was not maintained in operating condition. Findings on August 23, 2017: a. There was an accumulation of lint and clothing behind the dryers creating a fire hazard. At the time of the follow up survey, the same socks	(C 189)	<i>Second Activity Room door hardware</i> <i>Kitchen hood will be thoroughly cleaned & maintained 1/4</i> <i>Will verify all Rad Dampers are not closed - will upgrade those that are closed with correct heat link -</i>	<i>9/29/17</i> <i>10/1/17</i> <i>10/20/17</i>

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(C 189)	Continued From page 7 were behind the dryer and there was a greater build up of lint than previously observed. b. The left side dryer duct was not secure at the wall penetration. At the time of the follow up survey the connection has deteriorated further. Interview with Staff revealed that the Owner was responsible for completing the repairs and she did not know why the dryer duct had not been repaired. 7. Based on observations, the exterior of the building was not maintained. Findings on August 23, 2017: a. At the side exit nearest the parking lot, the veneer on the soffit over the door was defacing and separating at the seam. Interview with Staff revealed that the Owner was responsible for completing the repairs. Some of the exterior repairs had been completed and they were working on the remaining citations. b. A section of the exterior siding was loose and separating from the building above and to the left of the entrance at the office. Interview with Staff revealed that the Owner was responsible for completing the repairs. Some of the exterior repairs had been completed and they were working on the remaining citations. c. At the air handling unit outside the office, there are gaps in the soffit panels around the duct penetrations leaving holes for pests to enter. Interview with Staff revealed that the Owner was responsible for completing the repairs. Some of the exterior repairs had been started and they were working on completing the repairs. g. At the air handling unit outside the office, a section of the soffit vent material has fallen out and repaired by covering the opening with mechanical tape. Interview with Staff revealed that the Owner was responsible for completing	(C 189)	laundry room to be cleaned monthly to prevent further issues with lint block clothing - will repair dryer duct. All soffit damage further damage siding damage will be repaired to prevent further issues - buckling to be patched as well	10/20/17 11/1/17

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(C 189)	Continued From page 8 the repairs. Some of the exterior repairs had been started and they were working on completing the repairs. 8. Observations revealed that one of the bedroom windows was not maintained in an operating condition. This affects two of the residents. Findings on August 23, 2017: a. Room 104-the window was jammed in the frame at an angle so that it could not be opened or closed. Interview with Staff revealed that the Owner was responsible for completing the repairs. She did not know why the window had not been repaired.	(C 189)	Windows to be replaced so as to further prevent window alignment issues	11/1/17
(C 195)	Hot Water System 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 118 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 observation, the facility failed to maintain the hot water temperature at a minimum of 100 degrees F at all fixtures used by residents.	(C 195)	Hot water settings were set to accommodate min of 100° & max of 114° - temps to be checked monthly -	9/29/17

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(C 195)	Continued From page 8 Findings on August 23, 2017: a. The water temperature taken at the Men's bath was 95 degrees F. Interview with Staff revealed that they were getting readings between 100 and 115 degrees. She stated that when the residents showered, the water temperature dropped.	(C 195)			