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
	HAL011011	A. BUILDING: 01 B. WING _____	09/07/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARJORIE MCCUNE MEMORIAL CENTER	101 LIONS WAY BLACK MOUNTAIN, NC 28711

(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 Construction Section Biennial Survey by Dennis Harrell on 9-7-2017. Records indicate this facility was first licensed on 6-4-1979, for 64 beds. Based on this information, we are requiring this facility to meet the 1978 Edition of the North Carolina State Building Code-Section 409.1(c) Institutional Occupancy, the 1977 Rules for the Licensing of Adult Care Homes, and the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds.	C 000		
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 building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: a. Several portable medical oxygen cylinders were stored in a beverage crate. b. Several portable medical oxygen cylinders were stored in unapproved plastic bins. 2. Based on observation, the hose on the shower	C 166	The portable medical oxygen provider, Aeroflow, provided the center with approved storage containers. The center now has all of the portable medical oxygen cylinders in proper storage containers. The Quality Assurance Coordinator and 3rd shift Medication Technician are monitoring the oxygen room on a weekly basis.	9/8/17

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Francis J Lyons Jr Administrator — 9-22-17

* 1 attachment

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C 166	Continued From page 1 wand in the Beauty Salon was long enough to reach the sink basin and there was no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixture present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed. 3. Based on observation, the hose on the shower wand in the bathroom off bedroom 116 was long enough to reach the sink basin and there was no vacuum breaker provided. Based on interview with maintenance staff, this same setup exists in several other bathrooms off bedrooms. Hoses on water fixtures that are long enough to reach the flood rim of the fixture present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed.	C 166	It appears that during the inspection we did not indicate that the Beauty Parlor does have a vacuum breaker. However, it is not on the line but is built into the hose. We overlooked informing the inspector that this was the case. Room #116 shower hose wand has had a vacuum breaker installed. All of the bathrooms have been checked and vacuum breakers have been installed where one didn't exist.	09/08/17
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on a review of documents, the records	C 185	The Fire Drills will include a description of what the rehearsal involved. Attached is a copy of the new form for the monthly drills at the center.	9/08/17

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C 185	Continued From page 2 available onsite included little to no description of what the rehearsal involved.	C 185		
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, corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include; a. One of the smoke barrier doors on the Administration Hall would not latch when closed by the fire alarm system. b. One of the smoke barrier doors on B Hall would not latch when closed by the fire alarm system. c. There was a hole by the latchset through the door to room 111. 2. Based on observation, the battery powered emergency light in the corridor near room 116 would not work when tested. Battery powered emergency lights that will not work properly for at	C 189	The smoke barrier door on the Administration Hall had WD40 administered to the latch which resolved the problem. The smoke barrier door on the B Hall had WD40 administered to the latch which resolved the problem. The hole by the latch set on the doo r of room #111 has had a metal ring placed around the knob.	09/11/17

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C 189	Continued From page 3 least 90 minutes could endanger the residents and staff. 3. Based on observation the required one-hour fire rated walls and/or ceilings was compromised in a location. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Finding includes: Holes (2) in the ceiling of the C Hall furnace room.	C 189	The battery powered emergency light in the corridor near room 116 has had a new battery installed. Back-up batteries have been purchased. Maintenance monitors the exit lights on a weekly basis. The ceiling of the C Hall furnace room was fire caulked. This had been caulked once before. Therefore, maintenance determined that checking caulking will be monitored on a monthly basis.	09/11/17
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 (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: Based on observation the facility failed to maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly	C 199		09/13/17

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C 199	Continued From page 4 bacteria. Findings include; The exhaust fan was removed from the housing in the housekeeping room.	C 199	The housekeeping room exhaust fan has been replaced with a new exhaust fan.	09/15/17

FIRE DRILL SCHEDULE

(Drills must he conducted once a quarter on each shift)

McCune Center: _____

Address: _____

Date of rehearsal: _____ Time of rehearsal: _____ Shift 1st 2nd 3rd

Person in charge: _____

Other staff members present: _____

_____

Time for evacuation: _____

Areas covered: (check any that apply)

Fire extinguishers instructions _____ Fire alarm operation _____

Fire evacuation maps _____ Discuss fire hazards to look for _____

Other: _____

****

Date of rehearsal: _____ Time of rehearsal: _____ Shift 1st 2nd 3rd

Person in charge: _____

Other staff members present: _____

_____

Time for evacuation: _____

Description of Fire Drill:

_____

_____

_____

Location: _____

Actions Taken: _____

_____