

PRINTED: 10/04/2017
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL042005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 09/06/2017
NAME OF PROVIDER OR SUPPLIER CAROLINA REST HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 1361 CAROLINA REST HOME ROAD ROANOKE RAPIDS, NC 27870		
(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 September 6, 2017. Records indicate this facility underwent a major renovation due to a fire and was relicensed on February 27, 2003. The facility is currently licensed for 40 Beds. A new 11 bed addition (no change in capacity) was completed in May of 2017. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1996 Edition of the North Carolina Building Code, Institutional Occupancy, the 2012 Edition of the North Carolina Building Code, Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. Deficiencies were cited which require a Plan of Correction.	C 000		
C 143	Janitor's Closets-Locked SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be monitored while in use; This Rule is not met as evidenced by: 1. Observations revealed that the storage areas containing cleaning agents were not kept locked. This creates a hazard for the residents.	C 143		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Melanie Hyles**Manager**10-18-17*

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C 164	Continued From page 2 (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 doors in good repair. Findings on September 6, 2017: a. A Hall Utility room - the door hardware was loose. b. A Hall Room 113 - the door drags on the frame making it difficult to open and close. c. B Hall Room 202 - the door drags on the frame making it difficult to open and close. d. Kitchen - the finish on the exterior door is flaking and peeling. 2. Observations revealed that the facility was not maintained free of chronic or unpleasant odors. Findings on September 6, 2017: a. A Hall Sprinkler Riser room - the mop sink had a gray film across the surface and there was mildew in the corners. There was a strong, unpleasant odor emanating from the sink. 3. Observations revealed that the ceilings were not maintained in a clean condition. Findings on September 6, 2017: a. Kitchen - the ceiling around the supply vent near the kitchen hood has a layer of dirt around the vent. 4. Observations revealed that the walls were not maintained in good repair. Findings on September 6, 2017: a. Beauty Salon - there was a large hole in the	C 164 1A. 1B. 1C. 1D. 2A. 3A. 4A.	The A Hall utility room hardware was repaired. A Hall room 113 door has been repaired B Hall room 202 door has been repaired. Kitchen exterior door has been replaced by a brand new door. A hall riser room mop sink has been cleaned and sanitized. Housekeeping will monitor this. Kitchen ceiling around supply vent has been cleaned. Housekeeping will monitor this. Beauty Salon plumbing line has a flange added, there is no hole remaining.	10-9-17 10-9-17 10-9-17 10-9-17 10-9-17 10-9-17 10-9-17

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C 164	Continued From page 3 wall where the plumbing lines from the sink enter the wall.	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. Based on observation, the facility was not maintained free of all obstructions. Findings on September 6, 2017: a. The door to the B Hall from the sitting room has a keyed lockset. If locked, the door creates an obstruction for the B and C residents to access the common areas. 2. Based on observation, the facility was not maintained free of all hazards. Findings on September 6, 2017: a. B Hall Room 209 - the laminate floor is buckling at the door creating a tripping hazard for the resident occupying the room. b. Laundry Room - the insulated wall panels have deteriorated and are falling apart. c. Laundry Room - Instead of a backdraft damper, there is a 1 inch mesh installed on the dryer exhaust and it has a heavy accumulation of lint.	C 166 1A. 2A. 2B. 2C.	The lockset on B hall door has been removed. There is currently a standard non-locking door knob installed. B hall room 209 flooring has been replaced. The laundry room wall panels have been assessed by our contractor (CP services) and will be completed by 10-26-17 The laundry room mesh on the dryer exhaust has been cleaned.	9-6-17 10-9-17 10-26-17 10-9-17

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C 189	Continued From page 4	C 189		
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 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. Findings on September 6, 2017: a. Five of six exit light/signs did not light up on battery backup when tested. 2. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on September 6, 2017: a. A Hall, Clean Utility - there is a gap in the ceiling at the supply vent. b. A Hall, Room 109 - there are gaps around the fire alarm head. c. B Hall, Room 209 - the escutcheon plate is missing at the sprinkler head in the right side	1A. 2A. 2B. 2C.	All of the exit light/signs have been replaced with brand new batteries and in proper working order. This will be monitored by our maintenance person quarterly. A hall clean utility room gap in the ceiling at the supply vent has been sealed. A hall room 109 gaps around fire alarm head have been sealed. B hall room 209 escutcheon plate has been replaced.	10-9-17 10-9-17 10-9-17 10-9-17

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C 189	Continued From page 6 Findings on September 6, 2017: a. The door separating the kitchen and dining rooms had a kickdown attached to the door and was propped open using a wedge.	C 189 5A.	Kickdown on kitchen door has been removed. Meeting held with kitchen staff about this and to reiterate no stoppers on door holdings of any kind. A meeting was held with all staff to identify these issues and make them aware of what to look for to correct these issues. moving forward, we have placed Building Survey sheets on each hall for staff to list any repairs or problems that need attention. Our contractor (GP services) will check these on each visit + correct issues. GP services are also on call for us anytime the need arises. Staff will also report repairs needed to the office.	10-9-17 10-9-17