

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: fc1079067	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/21/2017
NAME OF PROVIDER OR SUPPLIER FAITHWORKS ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 814 LINDSEY STREET REIDSVILLE, NC 27320		
(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 The Adult Care Licensure Section conducted an Annual survey on September 21, 2017.	C 000		
C 074	10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping And Furnishings (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure floors in both common living rooms, the hallway, and 2 of 3 resident bedrooms were clean and in good repair, including the doors in the common areas and the men's common bathroom, the air vent in the hallway, and the wooden cabinet that held the residents refrigerator. The findings are: Observation of the floors in the facility during the initial tour on 09/21/17 between 9:30 am and 11:00 am revealed: -The hallway was approximately 30 foot long with 3 resident rooms located on the right side of the hall, and a common living room area on the left side of the hall. -All the baseboards were wood and had a thick brownish build-up of dust and dirt. -The carpet that adjoined the baseboard had small pieces of trash around all the baseboards in the hallway.	C 074	Deep cleaning of The Facility was done And will continue Daily alternating areas as needed	

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

Jack Martin Jr

TITLE

SIC

(X6) DATE

11/2/17

STATE FORM

0010

7ZJT11

If continuation sheet 1 of 16

jeanne S Robinson RN

11/9/17 Acknowledged and reviewed

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C 074	Continued From page 1 -An air vent located on the right side of the hallway was approximately 3 feet by 3 feet had a thick build-up of dirt and dust between the vents. -Three chairs were located on the left side of the hallway and underneath the chairs were pieces of small paper trash and a dust build-up. -There was a common living room area located on the left side of the hallway with small pieces of paper trash along all the baseboard's and corners of the room. -There was a large window located on the front wall in the common living room area with multiple dead fly's on the floor directly under the window. -The common living room area located in the back of the facility had multiple small pieces of paper and dirt around the corners of the floors. -The common living room had two couches, behind the couch located on the back wall was a build-up of approximately 20 to 30 dead fly's and paper trash. -In the far corner of the common living room area were multiple pieces of paper trash and a heavy dust/dirt build-up. -In the men's common bathroom there were five black strips each approximately 5 inches long and 3 inches wide near the shower/ bathtub that were ruff and raised above the natural floor, a rug which had been secured with a tape like substance had been removed from this area. Observation of the first resident room located on the right side of the hallway on 09/21/17 at 10:00 am revealed: -There were two beds in the room with 2 residents residing in the room. -The baseboards around the entire room had a thick build-up of dust and blackish/ brown dirt. -Underneath both beds were heavy dust and small paper trash items. -There was dust and dirt build-up behind both	C 074		

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C 074	Continued From page 2 headboards and along the baseboards behind the beds. -All the corners of the entire room had dust and lint build-up. -There was an area on the left side of the door frame that had paint missing extending up approximately 12 inches from the floor. -There were several dead fly's located on the floor under the table directly under the window area. Observation of the second resident room located on the right side of the hallway on 09/21/17 at 10:15 am revealed: -There were two beds in the room with 2 residents residing in the room. -Around the first bed were clothes items on the floor and several pairs of shoes laying on the floor of the right side of the bed. -There was a thick dust, dirt build up and several paper items under the first bed. -The headboard of the first bed had a think dust build-up on the headboard as well as behind the headboards on the floor and baseboard. -The baseboards around the entire room had a thick build-up of dust and blackish/ brown dirt. -Undemeath both beds were heavy dust and small paper trash items. -All the corners of the entire room had dust and lint build-up. -There was an area on the left side of the door frame that had paint missing extending up 12 inches from the floor. -The closet on the right side of the room had what appeared to dirty soiled clothes on the floor, and clothes partly hanging out of a full laundry hamper. Observation of the third resident room located on the right side of the hallway 09/21/17 at 10:25 am	C 074	<i>Resident closets have been cleaned and will be more closely monitored by staff.</i> <i>PAINTING has been scheduled with owner and should be completed by 11/15/17</i>	

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C 074	Continued From page 3 revealed a single female resident resided in the room, the room was clean and in good repair. Observation of the men's common bathroom on 09/21/17 at 10:42 am revealed: -There was paint missing from the door jam 14 inches from the floor and extending upward on the door frame. -There was a thick blackish/brown build up of dirt and dust behind the door and in the corners of the floor. -Directly beside the toilet on the left side there was a brownish dirt and dust build-up. Observation of the common living room area located in the back of the facility on 09/21/17 at 11:00 am revealed: -There were two residents sitting in the living room area. -There was a metal/ aluminum door leading to an outside deck area. -At the bottom of the metal door the entire width of the door had a thick blackish build-up of dirt and grime. -There was a large wooden cabinet that held a small 2 and a half foot refrigerator that was used to store the residents' personal beverages and snacks. -There was a black substance on the cabinet area directly under the refrigerator which appeared to mold/rotted wood. -Directly under the refrigerator, on the wall and floor was a blackish brown dirt build-up. -The baseboards in the entire room were covered in dust and along the carpet near the baseboards were dirt and small trash items. -In the far corner of the common living room area near a large plastic potted plant, there were multiple trash items and dust build-up which extend 2 feet from the wall and circled the base	C 074		

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C 074	Continued From page 4 of the plant area. Interview on 9/21/17 at 11:15 am with the two residents in the common living room area revealed: -One could not remember when the carpet had been cleaned or vacuumed. -One had never seen anyone clean the metal door leading to the outside deck. -It's dirty in here, but they do the best they can." Interview on 9/21/17 at 11:38 am with another resident who resided in the first room revealed: -The room was never cleaned. -He did not like it in the facility. -He could not recall when was the last time staff used the vacuum cleaner. -Staff never cleaned under his bed. -"I hate the mess." Interview on 9/21/17 at 12:00 pm with another resident in the second room revealed: -He like it at the facility. -He did not pay attention to the dirt build up or the dust on the baseboards and on the carpet. -"They clean sometimes." Interview on 9/21/17 at 12:05 pm with a Medications Aide (MA) revealed: -She worked in the facility as a MA and was also responsible for cleaning the facility. -She cleaned the facility 2 times a week on Friday and Sunday. -She had vacuumed and moped on those days. -She was unaware of the dirt build-up around the baseboards. -The baseboards would be a deep cleaning. She could not recall when they had been cleaned. -There was no current cleaning schedule for the facility.	C 074		

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C 074	Continued From page 5 Interview on 9/21/17 at 2:00 pm with the Owner revealed: -He was unaware the facility floors, walls, and door were dirty. -He relied on the MAs to clean the facility. -He would immediately initiate a cleaning schedule for the MAs to follow. -He would oversee the cleaning duties to ensure they were completed by the MAs.	C 074		
C 075	10A NCAC 13G .0315(a)(2) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (2) have no chronic unpleasant odors; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to assure the facility did not have an unpleasant urine odor. The findings are: Observation upon entrance to the facility on 9/21/17 at 9:30 am revealed the facility smelled like urine. Observations of the first resident room on 9/21/17 at 9:40 am revealed: -Two resident resided in the room. -The first bed was soiled and smelled like urine. Observation on 9/21/17 at 10:45 am revealed the Medication Aide (MA) was changing the linens	C 075	<i>Carpets cleaned and wall be cleaned more frequently to keep urine smell down linens to be changed and cleaned 3 times a week. Also as necessary</i>	

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C 075	Continued From page 6 and covers to both resident's beds in the first room. Interview with the MA on 9/21/17 at 11:05 pm revealed: -The facility had always smelled like urine. -There were two residents in the first room who were incontinent of urine. -One resident would attempt to use the urinal and would miss, spilling urine on the bed-sheets. -The other resident could not make it to the bathroom all the-time and urinated in the bed. -"He sometimes urinate on the floor." -"I change the linens every week on Saturday, and when they mess them up." -The Administrator had been working on trying to get rid of the urine scent inside of the facility "for a long time." Interview on 9/21/17 at 10:21 am with the responsible party of the resident in the first bed revealed: -The resident in the first bed used a urinal and sometimes wasted urine on his bed and on the floor. -She had no concerns regarding care for the resident in the first bed except that "his room sometimes smelled like urine." -She had not spoken to staff regarding the odor of urine. Observation of the facility on 9/21/17 at 11:15 pm revealed the urine scent was not as strong inside of the facility. Interview on 9/21/17 between 11:15 am and 12:00 pm with two residents revealed the residents did not have a problem with the urine odor inside of the facility.	C 075		

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C 075	Continued From page 7 Interview with the Owner on 9/21/17 at 2:00 pm revealed: -The facility had two residents who were incontinent residing in the first resident room. -He was aware of the urine odor in the facility. -He would initiate a cleaning schedule for the MAs to include checking the 2 residents in the first resident room more often for incontinence.	C 075		
C 077	10A NCAC 13G .0315(a)(4) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure a North Carolina Division of Environmental Health inspection was completed annually. The findings are: Observation during tour of the facility on 9/21/17 revealed there was no sanitation inspection report posted in the facility. Interview on 9/21/17 at 10:15 with the Owner revealed: -The local Health Environmental Inspector had not been to the facility to inspect since 6/23/16. -He was aware the facility was responsible for contacting the Environmental Health Inspector for inspections yearly.	C 077		
			<i>Sanitation Inspection completed and will be done on time in the future. Szc will oversee.</i>	<i>11/2</i>

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

FAITHWORKS ASSISTED LIVING

**814 LINDSEY STREET
REIDSVILLE, NC 27320**

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C 077	Continued From page 8 Review of an Environmental Health Residential Care Facility inspection dated 6/23/16 revealed: -There were 7 demerits deducted related to non working refrigerator thermometer, food storage containers located on the floor, and a loose bathroom faucet was in good repair. -The facility had a status code of an "A". Interview on 9/21/17 at 2:00 pm with the Owner revealed he would immediately contact the local Environmental Health Inspector to inspect the facility. Telephone interview on 9/21/17 at 5:00 pm with the local Environmental Health Inspector revealed: -The last inspection was completed on 6/23/16. -The facility was required to contact the Health Inspection's office and request an inspection yearly. -The facility had not contacted the Health Inspector's office for a yearly inspection.	C 077		
C 078	10A NCAC 13G .0315(a)(5) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by:	C 078		

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C 078	Continued From page 9 TYPE B VIOLATION Based on observations and interviews the facility failed to assure the home was maintained clean, and free of all obstructions and hazards as related to live and dead bed bugs in a resident's room. The findings are: Observation of the facility during the initial tour on 09/21/17 between 9:30 am and 11:00 am revealed: -There were three resident's bedrooms on the right side of the hallway. -There were two beds in the second room with two residents residing in the room. -There was a plastic cover on the first bed mattress, with several open holes in the plastic. -There was a live bedbug crawling on the top sheet of the first resident's bed. -There were dead bed bugs, casings, blood smears, and fecal matter on the sheets and top bedcovers of the first resident's bed. -There were dead bed bugs, casings, blood smears, and fecal matter in the corners of the first resident's mattress. -The second bed in the room had a plastic cover over the mattress. -There were dead bed bugs, casings, blood smears, and fecal matter on the sheets and top bedcovers of the second resident's bed. -There were dead bed bugs, casings, blood smears, and fecal matter in the corners of the second resident's mattress. Interview on 9/21/17 at 12:00 pm with the resident in the second room first bed revealed: -He had lived in the facility for 6 years. -He had been itching on his lower legs for about a	C 078	<i>contacted pest control for inspection. followed recommendations by covering all MATTRESSES WITH zipped casings. laundered all bedcoverings and clothes. spray treated affected rooms and monitored for bugs daily. treated entire house on 10/4/17 and will continue to monitor & treat if necessary. sic responsible</i>	10/4/17

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C 078	Continued From page 10 week. -He had never told the physician or the nurse. -“I think there is a tick or something in the bed that’s biting me.” -He told the owner of the facility about 2 months ago, “there are bugs in the room.” -He said the owner sprayed the room when he first told him and sprayed again 2 weeks ago. -The owner had applied plastic to his mattress about 2 months ago. Observation on 9/21/17 at 12:08 of the resident in the first bed of the second room revealed: -His lower legs had multiple scratch marks where he had been scratching his legs. -There were no open or draining wounds. Interview on 9/21/17 at 2:10 pm with the second resident revealed he denied itching, bites, or any bugs in his room. Interview on 9/21/17 at 12:05 pm and at 2:30 pm with a Medications Aide (MA) revealed: -She worked in the facility as a MA and was also responsible for cleaning the facility. -She cleaned the facility 2 times a week on Friday and Sunday. -She was not aware there were bedbugs in the resident’s room in the facility. -She was aware the owner placed plastic covers on all the resident’s mattresses about 2 months ago. -She was aware what a bedbug looked like. -She denied seeing any bedbugs in the facility. -She was not aware of a current cleaning schedule for the facility. -She had never sprayed any room or had never contacted a pest control company for the bedbugs. -None of the 5 residents ever complained to her	C 078		

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STATE FORM

6859

7ZJT11

If continuation sheet 11 of 16

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C 078	Continued From page 11 about bedbugs or itching/bites. Interview on 9/21/17 at 2:00 pm with the Owner revealed: -He was aware the facility had bed bugs a few months ago, but thought he had gotten rid of them by spraying. -A resident told him he was itching at night and was getting bit by some bug. -He had never seen a live bedbug in the facility until 9/21/17 when the survey team showed him a live bedbug on the residents sheets. -He would immediately contact the local pest control company for an inspection. -He relied on the MAs to clean the linens and to keep the facility clean. -He would inform the MA's to change the 2 beds in the second resident room and wash them separate from other residents' clothes and dry for several cycles on high heat. -He would continue to spray until the pest control company could inspect the facility. -He would ask the pest control company for advise on washing bedding and cleaning residents rooms. -He would immediately make a cleaning schedule for the MA's to follow, he would oversee the cleaning duties to ensure they were completed by the MAs. Observation of the pest insecticide used by the facility owner revealed the active ingredient was Geranol 1.00% (a oil derived from plants used to repel insects). Based on observations, interviews, and record reviews the facility failed to assure the home was maintained clean, and free of all obstructions and hazards as related to live and dead bed bugs, in which one resident obtained bites and itching to	C 078		

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C 078	Continued From page 12 the skin. The failure to contact the pest control company treatment for bed bugs, was detrimental to the health and safety of the residents and constitutes a Type B Violation. A Plan of Protection was provided by the facility on 9/21/17: -Immediately, the room identified will be cleaned and the sheets and bedding removed. -The Owner will speak to all 5 residents to assure no bites or bedbugs in their rooms. -Immediately the Administrator will contact the local pest control company. -The facility-staff will continue to spray until the license pest control have inspected and recommend a treatment. -All residents will be assessed for bites and itching by the MAs and follow-up with the physician until bed bugs are no longer a problem. -Staff will be trained on bedbugs and cleaning rooms per the pest control recommendations. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 5, 2017.	C 078		
C 273	10A NCAC 13G .0904(d)(3)(A) Nutrition and Food Service 10A NCAC 13G .0904 Nutrition and Food Service (d) Food Requirements in Family Care Homes: (3) Daily menus for regular diets shall include the following: (A) Homogenized whole milk, low fat milk, skim milk or buttermilk: One cup (8 ounces) of pasteurized milk at least twice a day. Reconstituted dry milk or diluted evaporated milk	C 273	<i>MILK will be provided or made available to anyone desiring it. STC will oversee</i>	<i>9/22/17</i>

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER FAITHWORKS ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 814 LINDSEY STREET REIDSVILLE, NC 27320		
(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 273	Continued From page 13 may be used in cooking only and not for drinking purposes due to risk of bacterial contamination. This Rule is not met as evidenced by: Based on observations interviews and record review, the facility failed to serve eight ounces of pasteurized milk at least twice a day to residents. The findings are: The facility had a census of five residents. Review of the Weekly Menu Spreadsheet provided by the Dietary Manager revealed: -One cup of milk was to be served at breakfast and dinner. -30 cups of milk were required to meet the needs of the residents for three days. Observation of the kitchen on 9/21/17 at 10:10 am revealed 1 opened gallon of milk in the refrigerator with what appeared to be enough left for one serving. Observation of the lunch meal on 9/21/17 at 12:00 pm revealed: -There were 3 residents served at the kitchen table. -One resident requested to eat lunch later. -One resident stated that he was not hungry. -Beverages served included juice and water. Interview with the Medication Aide (MA)/Personal Care Aide (PCA) on 9/21/17 at 12:06 pm revealed: -She was responsible for serving meals and beverages. -She only served milk at breakfast. -Milk was not offered at lunch, dinner, or with	C 273		

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C 912	Continued From page 15 This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure residents received care and services that were adequate, appropriate and in compliance with federal and state laws and rules and regulations related to Housekeeping and Furnishings. The findings are: A. Based on observations and interviews the facility failed to assure the home was maintained clean, and free of all obstructions and hazards as related to live and dead bed bugs in a resident's room. [Refer to Tag 0078 10A NCAC 13G .0315 Housekeeping and Furnishings(a)(5)(Type B Violation)].	C 912		

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C 273	Continued From page 14 snacks. Interview with a resident revealed on 9/21/17 at 12:09 pm revealed: -Milk was served at breakfast only. -He did not like milk. Interview with the owner on 9/21/17 at 12:13 pm revealed: -He was aware that milk was on the menu to be served at breakfast and dinner. -He shopped for groceries once a week on Thursdays. -He was responsible for making sure that milk was in the facility. -He was responsible for serving meals on days when the MA/PCA was not working. -Milk was only served at breakfast with cereal. -Not all residents drank milk. Interview with a second resident on 9/21/17 at 12:20 pm revealed: -Milk was served at breakfast only. -He would have liked milk with all meals. Interview with a third resident on 9/21/17 at 1:41 pm revealed: -Milk was only served at breakfast. -He was alright with having milk once a day. -He could get milk if he asked for it.	C 273			
C 912	G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.	C 912			