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
	HAL078038	A. BUILDING: 01 B. WING	09/21/2017

CONSTRUCTION SECTION
NOV 06 2017
RECEIVED

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COVENANT CARE	600 MT. MORIAH ROAD LUMBERTON, NC 28360

(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 21, 2017. Records indicate this facility was first licensed on September 28, 1998. The facility is currently licensed for 30 Beds. Therefore the facility was surveyed for conformance with the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure, applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and the 1996 Edition of the North Carolina Building Code, Institutional Occupancy. Deficiencies were cited which require a plan of corrections.	C 000	Covenant Care was built in 2003. The Construction Section of DFS had just approved our plans to build. The plans showed no handrails in that stall and we have not been told to install them through any construction inspections since 2003. We have now placed a portable toilet with rails over this toilet in the stall as directed.	10-24-17
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. Based on observations, the facility did not provide hand grips at one commode accessible to residents. Findings on September 21, 2017: a. Bath #1 - the commode in the first stall did not have hand grips.	C 133	Bathroom toilets and handrails has been added to the monthly inspection sheet to ensure it is in compliance from now on. This sheet is checked monthly by maintenance and reviewed quarterly by the Administrator.	10-24-17

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Adm. — (X6) DATE: 10-24-17

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C 164	Continued From page 1	C 164		
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 ceilings were not maintained clean and in good repair. Findings on September 21, 2017: a. Physician's office bathroom - there were black mildew stains on the ceiling around the light fixture, the vent and over the sink. b. Hot Water Closet #1 - there were gray stains on the ceiling in the back left corner. 2. Observations revealed that the doors were not maintained in good repair. Findings on September 21, 2017: a. There is a small hole rectangular hole approximately 1 1/2" x 3" in the door between the dining and kitchen. b. Hot Water Closet #1 - the door is heavily damaged at the back side.	C 164	Doctors office ceiling was cleaned, Hot water closet spot was repainted, holes in doors repaired, and chair rails installed to prevent more holes by the Kitchen rolling table. All of these areas have been added to the monthly inspection sheet so these areas can be inspected monthly to ensure these areas are in compliance. This inspection sheet is done monthly by maintenance and reviewed quarterly by Adm.	10-24-17
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS	C 166		

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C 166	Continued From page 2 (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 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 September 21, 2017: a. Room #1 - there is one unsecured oxygen tank in the room.	C 166	Liberty was called and told that they must provide a stand with every tank. A stand was delivered to Covenant Care the next day for the 1 O2 Tank. PHC will insure that a stand is provided at the time of delivery of every tank. PHC will inspect building monthly to ensure this is in compliance in the future. 10-24-17	
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 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	C 189	All Nail pops in Beauty Shop were fixed, all Gaps around Sprinkler Heads were taken care of, 2 emergency lights replaced, and suppression system is being checked off as inspected monthly. All of these items have been added to the monthly inspection sheet to ensure these areas are inspected monthly and stay in compliance. This is done monthly by maintenance and reviewed quarterly by Adm. 10-24-17	

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C 189	Continued From page 3 fire and smoke to spread beyond the area of origin. Findings on September 21, 2017: a. Beauty Salon - two nail pops had penetrated the ceiling along the corridor wall. b. Corridor outside of Water Heater Room #4 - the sprinkler head escutcheon plate has dropped creating a gap in the ceiling. c. Kitchen - there is a gap around the sprinkler head outside of the pantry. d. Laundry Room - the right sprinkler head escutcheon plate has dropped creating a gap in the ceiling. e. Room #7 - the flange at the sprinkler head has shifted leaving a gap in the ceiling. 2. Based on observation, the kitchen fire safety equipment was not insured to be maintained in a safe and operating condition. Monthly in house service checks are required for the kitchen range hood suppression system. Findings on September 21, 2017: a. The monthly in-house service checks were not being conducted for the kitchen range hood suppression system. 3. 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 September 21, 2017: a. Dining Room - the emergency light did not light on test. b. The corridor emergency light outside of Room #8 did not light on test.	C 189		

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C 199	Continued From page 4	C 199		
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: 1. Based on observation, one housekeeping closet did not have exhaust ventilation at the rate of two cubic feet per minute per square foot. Findings on September 21, 2017: a. West side mop closet - the fan did not appear to be working when a thin sheet of plastic did not adhere to the surface of the fan.	C 199	Damper arm was broke on the Exhaust Fan in small closet, which was preventing the fan from drawing air out of the closet. Arm was repaired so air is now being pulled out of this room. All ventilation Fans in the building have been added to the monthly inspection sheet to ensure this area is inspected monthly and stays in compliance. Maintenance inspects this list monthly and Adm reviews the sheet quarterly.	10.24.17

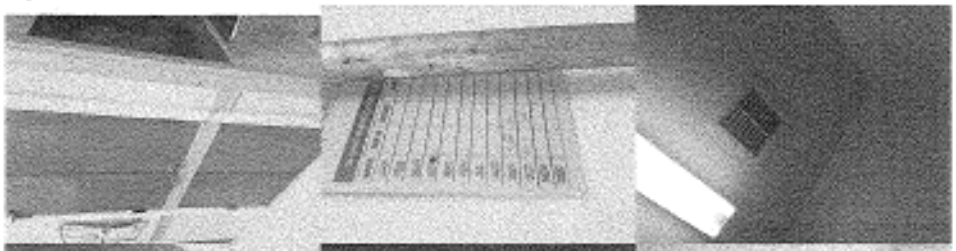
COVENANT CARE MONTHLY INSPECTION SHEET

2017	Jan.	Feb.	Mar.	Apr.	May.	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.
30 Bedroom Smoke Detectors										✓		
6 Bathroom Smoke Detectors										✓		
HALLS										✓		
LIVING RM										✓		
DINNING RM										✓		
STAFF OFF.										✓		
MED OFF.										✓		
ADM. OFF.										✓		
LAUNDRY RM.										✓		
SOILED LINEN										✓		
LINEN CLOSET										✓		
4 STAFF RMS.										✓		
ALL FIRE EX.										✓		
KITCHEN SUPRESSION SYSTEM										✓ due		
ALL PULL STATIONS										✓		
ALL EXIT SIGNS										✓		
EMERGENCY LIGHTS BACKUP										2 Fixed ✓		
HOT WATER #1 TEMP										✓		
HOT WATER #2 TEMP										✓		
HOT WATER #K TEMP										✓		
(Check Temps 2 x Mth)												
(100° to 116°)												

AC #1-5										✓		
AIR HANDLER #1-5										✓		
FILTERS										✓		
DOORS AND KNOBS										2 Fixed ✓		
Inspect Attic										✓		
NAIL POPS/CRACKS										Ready ✓		
ELECTICAL OUTLETS										✓		
ELECTICAL PLUGS										✓		
EXHAUST FANS										Clean ✓		
LIGHTING										✓		
WINDOWS										✓		
FIRE WALL PENATRATIONS										✓		
CEILING PENATRATIONS										Heads ✓		
SPRINKLER HEAD GAPS										Heads ✓		
HALL RAILINGS										✓		
Bathroom Toilets/Handrails									Installed	Seat ✓		
FIRE WALL DAMPERS										✓		
Vents Clean?										✓		
Any Ceiling damage or discoloring?										cleaned ✓		
Light Bulbs										✓		

Kitchen doors now have chair rail to prevent holes in doors

Added Suppression System to monthly checkoffs

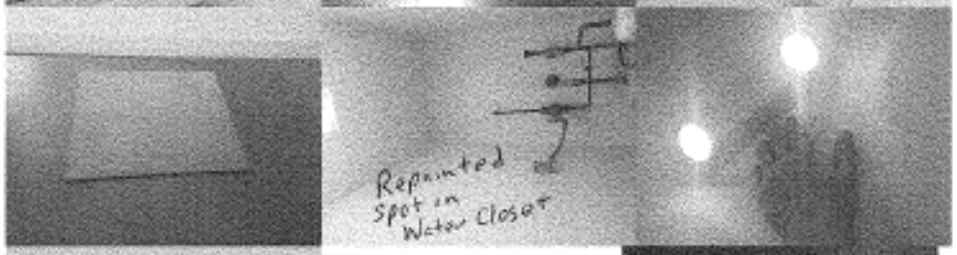


Fan damper arm replaced.

Back of Kitchen door

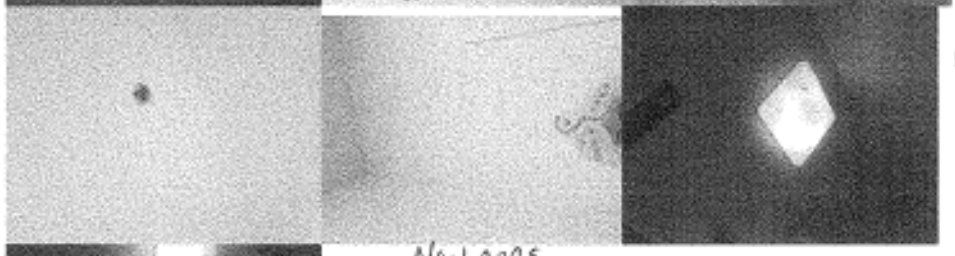
No more Sprinkler Head Gap

Hot Water door repaired



Replaced both Emergency Lights

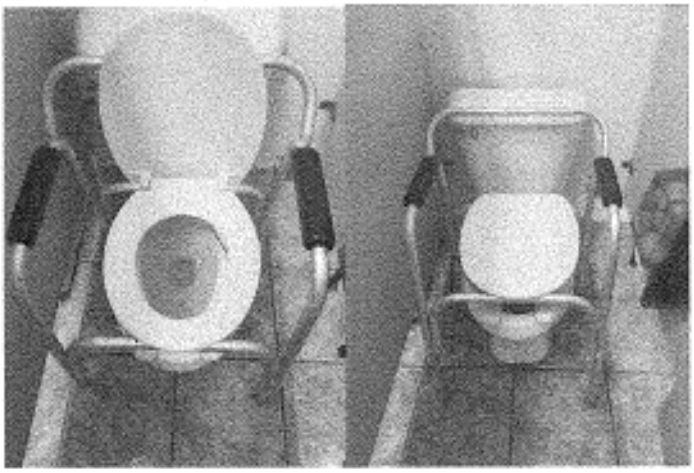
No more Gap



Doctors office ceiling cleaned

Nail pops fixed

No more Gap



✓J

THOMPSON ELECTRIC CO. OF LUM, INC.

P.O. BOX 1446, 505 W. 5th St., Lumberton, NC 28359
Security Systems
Sales & Service Ph: 739-3376

Customer's Order No. _____ Date 10-5 20 17

Name Covenant Care Home

Address

Phone:

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RETD.	PAID OUT	

QUAN.	DESCRIPTION	PRICE	AMOUNT
2	LED Lights		108 52
	Labor		90 00
	replaced lights in hall and		
	dining room		

All claims and returned goods MUST be accompanied by this bill.

0019083 Received By

TAX	13 90
TOTAL	212 42

GS-202-2
PRINTED IN U.S.A.

PRINTED WITH SOY INK

Thank You

Southern Heating & Air Conditioning, Inc.

№ 59126

DATE 9 | 21 | 17

P.O. Box 1543 — 2105-A East Elizabethtown Rd
LUMBERTON, NC 28358
Phone: 738-7000

CUSTOMER IS A PROSPECT FOR
- ☐ AIR CONDITIONING
- ☐ HEATING
- ☐ ELECT AIR CLEANER
- ☐ SERVICE CONTRACT
- ☐ _____

NAME / LOCATION OF WORK
ADDRESS: The Chemical Room

WORK TO BE DONE
The Exhaust Fan Is Not Working.

SOURCE	COST	QUAN.	ITEM	PRICE
	4 26		Fusible Link	4 26

Pd 10/26/17
$289.71
by O/C
BMB

BILL TO: Sean Ward

NAME: Covenant Care Nursing Home — CUSTOMER #: 6374
STREET: 600 Mt. Moriah Church Rd. — PHONE: 910-738-7777
CITY: Lumberton — STATE: NC — ZIP: 28360

MAKE	MODEL	SERIAL NUMBER

☐ WARRANTY ☐ SERVICE CONTRACT ☐ NORMAL ☐ _____

DATE	DESCRIPTION OF WORK PERFORMED
9-21	found bad damper, need to replace part.
10-26	installed fusible link. unit is working
	fine.

UPON INSPECTION OUR TRAINED TECHNICIAN RECOMMENDS:

INVOICE NUMBER

TECHNICIAN NUMBER: 30

AS ITEMIZED AT LEFT PARTS & MTL. TOTAL	4	26
TORCH ○ RECLAIMER ○ PUMP ○ NITROGEN ○		
FREIGHT		
SERVICE CHARGE -	96	50
LABOR 3hr.	170	00
SALES TAX	18	95
TOTAL	289	71
COUPON		
CASH ☐ CHECK ☐ CREDIT CARD ☐	$	

NOTICE: All invoices are due upon receipt. Past due accounts are subject to 1½% per month service charge (18% per annum) or a minimum charge of $1.50 per month.

COST BREAKDOWN	
MATERIAL	
LABOR	
TOTAL COST	

TIME ON JOB	ON	OFF
TRAVEL TIME	ON	OFF
SHOP TIME	ON	OFF

I HAVE AUTHORITY TO ORDER THE WORK, WHICH HAS BEEN SATISFACTORILY PERFORMED, AS OUTLINED ABOVE. IT IS AGREED THAT THE SELLER WILL RETAIN TITLE TO ANY EQUIPMENT OR MATERIAL THAT MAY BE FURNISHED UNTIL FINAL PAYMENT IS MADE, AND IF SETTLEMENT IS NOT MADE AS AGREED, THE SELLER SHALL HAVE THE RIGHT TO REMOVE SAME AND THE SELLER WILL BE HELD HARMLESS FOR ANY DAMAGES RESULTING FROM THE REMOVAL THEREOF.

X _____
CUSTOMER'S SIGNATURE

C.O.D.