

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/07/2017
NAME OF PROVIDER OR SUPPLIER CARILLON ASSISTED LIVING OF NEWTON		STREET ADDRESS, CITY, STATE, ZIP CODE 1088 RADIO STATION ROAD NEWTON, NC 28658		
(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 Ed Miller and Dennis Harrell conducted on December 7, 2017. Records indicate this facility was first licensed on 2-16-1998, for 96 beds with 44 of those beds in a Special Care Unit. Therefore, we are requiring that this facility meet the 1996 Rules for Homes for the Aged and Disabled; Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds and the 1996 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I). Deficiencies were cited that require a Plan of Correction.	C 000		
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 observation, the facility failed to provide tubs accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on December 7, 2017: a. B Hall Quit Room - the special tub did not	C 133		

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

TITLE

(X6) DATE

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C 133	Continued From page 1 have a hand grip (grab bar).	C 133		
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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on December 7, 2017: a. Beauty Shop - the HVAC return grille with its radiation damper have an excessive accumulation of dust/lint. b. C Hall across from Spa - the HVAC return grille with its radiation damper have an excessive accumulation of dust/lint. 2. Based on observation, the building Plumbing systems are not kept clean and in good repair. Findings on December 7, 2017: a. Exterior Water Heater Room - the recirculation pump is leaking lots of hot water on to the floor and walls. The water is began to migrate into the adjacent Wellness Office. b. Exterior Water Heater Room - the pressure relief valve's pipe extension for one of the water heater has fallen off the valve. Deficiency corrected before Construction Surveyors departed site.	C 164		

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C 164	Continued From page 2 3. Based on Observation, the facility failed to keep walls, floors or floor coverings clean and in good repair. Findings on December 7, 2017: a. Wellness Office - the floor and wall are getting wet from the recirculating pump leak. In addition, there is a hole in the wall where access to the recirculating pump was required.	C 164		
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: 1. Based on Record review and interview with Executive Director, Maintenance Technician and Maintenance Manager the Facility failed to document all aspects of the fire plan rehearsals. Findings on December 7, 2017: a. The fire plan rehearsal records did not included time, location of simulated fire and staff action.	C 185		

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C 189	Continued From page 3	C 189		
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, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on December 7, 2017: a. Corridor near Executive Directors Office - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. b. C Hall across from Spa - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke. Corridor door must positively/automatically latch into their frame under normal closing force. This could affect all residents, staff, and visitors if the doors did not latch to contain smoke/fire in the room of origin. Findings on December 7, 2017: a. Bedroom B-07 - the corridor door is missing its latch bolt, therefore the door cannot latch to its	C 189		

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C 189	Continued From page 4 frame. 3. Based on observation, the interior doors were not maintained in a safe and operating condition. Findings on December 7, 2017: a. Bedroom B-8 - the door handle is very loose and may not function properly when used.	C 189		
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 116 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 all fixtures used by residents to be a minimum of 100 degrees Fahrenheit and shall not exceed 116 degrees Fahrenheit. Findings on December 7, 2017: a. C Hall Spa - the sink had a hot water temperature of 85 degrees Fahrenheit. b. Bedroom C-21 - the sink had a hot water temperature of 90 degrees Fahrenheit.	C 195		