PRINTED: 02/21/2018
FORM APPROVED

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
	HAL043029	A. BUILDING: 01 B. WING	01/24/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ABSOLUTE CARE ASSISTED LIVING	431 JUNNY ROAD ANGIER, NC 27501

(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 Biennial Construction Survey by Suzanna Fay conducted on January 24, 2018. Records indicate that this facility was licensed on March 10, 1997. The facility is currently licensed as a Home for the Aged serving 12 residents. Therefore, this facility must meet the 1996 North Carolina State Building Code Section 419.5, and, the 1991 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes. Deficiencies were cited and a Plan of Correction is required.	C 000	See Attachment	05/01/18
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have an approved fire safety inspection report. Findings on January 24, 2018: a. The current fire safety inspection report listed two uncorrected violations. It was not determined at the time of survey if those had been corrected.	C 111		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 164		

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C 164	Continued From page 1 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 walls, ceilings and floors were not kept in good repair. Findings on January 24, 2018: a. Interview with staff revealed that a sprinkler pipe had burst during the recent cold snap causing damage to the common bathroom, staff bathroom and corridor. The damaged flooring in the corridor has been removed. The ceilings and walls have been patched but not sanded and painted. The toilet fixture has been removed for repairs. Crews were on site at the time of survey working on repairing the damaged areas. b. The corridor emergency lights had been replaced with smaller fixtures which did not cover the openings in the wall created by the previous fixtures. The holes were patched at the time of survey. b. Laundry room - there were sheets of lint discarded behind the dryer. The lint was removed at the time of survey.	C 164	"See Attachment"	03/01/18
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 166		

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C 166	Continued From page 2 (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. Observations revealed that the facility was not maintained free of hazards. Loose or damaged handrails could result in injury to a resident. Findings on January 24, 2018: a. The section of handrail to the left of the linen closet was damaged at the end. The rail was loose and there was a sharp nail protruding from the handrail. 2. Observations revealed that the facility was not maintained free of hazards. Broken or damaged accessories leave rough edges that can cause injury to the residents. Findings on January 24, 2018: a. Bathroom between rooms 5 and 6 - the towel bar at the tub was broken leaving the sharp edges of the brackets exposed.	C 166	"See Attachment"	03/01/18
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities.	C 175		

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C 175	Continued From page 3 This Rule is not met as evidenced by: 1. Observations revealed that the facility did not provide towel bars for the residents in the bedrooms or adjoining bathrooms. Findings on January 24, 2018: a. Every two bedrooms share an adjoining bathroom. Three of three bathrooms observed either did not have any or did not have a sufficient number of towel bars (one for each resident). None of the bedrooms had towel bars.	C 175		
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 fire and smoke to spread beyond the area of origin. Findings on January 24, 2018: a. Front office - there is an open penetration along the back wall where an electrical conduit enters the ceiling. The conduit was sealed at the	C 189	"See Attachment"	03/01/18

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C 189	Continued From page 4 time of survey. b. Riser room - there is an open penetration in the ceiling above the fire alarm panel. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on January 24, 2018: a. Living room - the hinges on the door to the living room were pulling loose from the frame preventing the door from closing completely. 3. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating due to sprinkler heads being obstructed could effect occupants in the fire compartment if the sprinkler head could not suppress a fire. Findings on January 24, 2018: a. Linen closet across from dining - items were stored within 18" of the sprinkler head. The items were removed at the time of survey. 4. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. Findings on January 24, 2018: a. The fire alarm was tested by spraying canned smoke into a smoke detector. Staff did not know how to silence or reset the fire alarm.	C 189	"See Attachment" 03/01/18	

Section 0300- Physical Plant 10a NCAC 13F 0302 Design and Construction

In order to be in compliance with the requirements of 10A NCAC 13F 0302 Design and Construction our facility Absolute Care will ensure that annual fire inspections are completed in a timely manner. The administrator will schedule all sanitation and fire inspection annually and follow up on any inspections and ensure that any plans of corrections are completed, reviewed and approved. I have attached a copy of the approval from Harnett County Emergency Services to verify that the inspection had been revealed no violations. This will be in effect officially March 01, 2018.

Section 0300- Physical Plant 10A NCAC 13F 0306 Housekeeping and Furnishings In order to be in compliance with the requirements of 10A NCAC 13F 0306 Housekeeping and Furnishing the administrator of Absolute Care will ensure that the walls, ceilings, and floors and floor coverings are kept clean and in good repair. The contractors completed all need repairs to those areas of the building that were damaged due to Sprinkler System freezing and damaging the building. The facility had plastic installed in the ceiling with additional insulation to prevent sprinkler pipes from freezing in the future. The emergency lights holes have been repaired and the fixtures will be put in place properly. The laundry rooms will be inspected by RCC on a weekly basis to ensure that there is no lint or debris left behind the dryer. This will be completed and implemented March 01, 2018.

Section 0300- Physical Plant 10A NCAC 13F 0306 Housekeeping and Furnishings In order to be in compliance with the requirements of 10A NCAC 13F 0306 Housekeeping and Furnishing the administrator of Absolute Care will ensure that there is no clutter and the facility is clean and orderly manner and free of all obstructions and hazards. The administrator will have staff complete a maintenance sheet on a weekly basis of all items that need repair or fixing. The handrails have been replaced and the nails were removed the broken and damaged accessories were replaced and repaired, the towel bar has been replaced and the bracket has been secured in place. This will be completed and implemented March 01, 2018.

Section 0300- Physical Plant 10A NCAC 13F 0306 Housekeeping and Furnishings In order to be in compliance with the requirements of 10A NCAC 13F 0306 Housekeeping and Furnishing the administrator of Absolute Care will ensure that the facility each resident will have individual towel, wash cloth and towel bar in the bedroom or an adjoining bathroom. The facility has purchased towel hooks for each resident to use for there towels and was clothes that is kept in their bedrooms. This will be completed and implemented March 01, 2018.

Section 0300- Physical Plant 10A NCAC 13F 0311 Physical Plant Other Requirements In order to be in compliance with the requirements of 10A NCAC 13F 0311 Physical Plant the administrator of Absolute Care will ensure that all fire safety, electrical, mechanical and plumbing equipment is being maintained in a safe and operating condition. All holes and gaps have been ceiled and secured so that no smoke or fire can spreader beyond the area of origin. In the front office the electrical conduit was sealed and

secured at the time of the inspection. All doors have been checked and secured to ensure that no smoke or fire can get into the Riser room or other areas. The hinge was replaced in the living room and secured to the frame. The fire safety equipment has been cleared of all linens and items that were obstructing the sprinkler head this was completed at the time of inspection. The facility emergency fire alarm system devices and equipment are in safe operational condition. The administrator completed a training with all Staff to ensure that they new how to silence or reset the fire alarm system. Annually staff will receive training on the fire alarm system operation and all new hires will receive training as a part of their orientation. This was effective March 01, 2018

HCFM

Office of the Fire Marshal
P.O. Box 370
Lillington, NC 27546
(910) 893-7580

Friday March 9, 2018

ABSOLUTE CARE ASSISTED LIVING - BLDG 2
431 JUNNY RD
BLDG 2
ANGIER, NC 27501

*** Violation Notice ***

An inspection of your facility on Thursday June 1, 2017 revealed the violations listed below.

ORDER TO COMPLY: Since these conditions are contrary to law, you must correct them upon receipt of this notice. An inspection to determine compliance with this notice will be conducted on or after Tuesday April 17, 2018

If you fail to comply with this notice before the reinspection date listed, you shall be liable for the penalties provided for by law for such violations.

Code # and Violation Description	Count
604.6.2 Functional test *Recheck violation record auto-generated from inspection on 04/17/2017.* *A functional test shall be conducted for every required emergency lighting unit equipment at 30-day intervals for not less than 30 seconds.* *Exception: Self-testing/self-diagnostic, battery-operated emergency lighting unit equipment that automatically performs a test for not less than 30 seconds and diagnostic routine not less than once every 30 days and indicates failures by a status indicator shall be exempt from the 30-day functional test, provided that a visual inspection is performed at 30-day intervals.* *BOTH EMERGENCY LIGHTS IN HALLWAY NEEDS REPAIR* Repaired 06/01/2017	2
901.6 Inspection, testing and maintenance *Recheck violation record auto-generated from inspection on 04/17/2017.* *Fire detection, alarm and extinguishing systems shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Non-required fire protection systems and equipment shall be*	1

HCFM

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P.O. Box 370
Lillington, NC 27546
(910) 893-7580

Friday March 9, 2018

ABSOLUTE CARE ASSISTED LIVING - BLDG 2
431 JUNNY RD
BLDG 2
ANGIER, NC 27501

*** Violation Notice ***

Inspected, tested and maintained or approved.

NEED ALARM SYSTEM TEST RECORDS
Repaired 06/01/2017

605.6 Unapproved conditions 1

Recheck violation record card generated from inspection on 04/13/2017.
Open junction boxes and open wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes.

NEED TO PROVIDE PLAN IN OPEN SPACE OF PANEL BOX ON RIGHT IN THE LAUNDRY ROOM
Repaired 06/01/2017

Strickland, Tracy
Inspector

X _____
Occupant/Owner

Harnett County Emergency Services

Office of the Fire Marshal
P.O. Box 370
Lillington, NC 27546
(910) - 893-7580

March 9, 2018

ABSOLUTE CARE ASSISTED LIVING - BLDG 2
431 JUNNY
ANGIER, NC 27501

*** COMPLIANCE STATEMENT ***

An inspection of your facility on 06/01/2017 revealed no violations of the N.C. State Fire Code.
No further inspections will need to be conducted until your next regular scheduled FireInspection.

Thank you for your cooperation.

Strickland, Tracy /Deputy Fire Marshal
Inspector