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
	HAL018023	A. BUILDING: 01 B. WING	R 11/08/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUSTIN ADULT CARE	511 BUMGARNER INDUSTRIAL DRIVE CONOVER, NC 28613

(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 Follow Up Construction Survey by Dennis Harrell on 11-8-2017. Many deficiencies were not corrected. Further action is required.	{C 000}		
{C 160}	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Based on observation, the outside grounds were not maintained in a safe condition. This affects the safety of the residents and staff. Findings on August 23, 2017 and 11-8-2017: a. An open gutter downspout drain pipe was observed at the back corner outside of the med room. The sidewalk at the pipe was broken and pulling away from the building. These two items pose a possible tripping hazard. Interview with Staff revealed that the Owner had begun repairs on the front walks and had not yet started on the back. b. The sidewalk leading to the basketball goal was broken and cracked creating a possible tripping hazard. Interview with Staff revealed that the Owner had begun repairs on the front walks and had not yet started on the back. c. One of the concrete covers for the grease pits had broken leaving a large well approximately 2 cubic feet in size. The grease pits are not near	{C 160}	downspout replaced & sidewalk work to be repaired - weather. sidewalk to basketball goal to be repaired grease pits cover will be replaced	1/12/18 1/12/18 1/12/18

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Administrator / owner — 12/29/17

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{C 160}	Continued From page 1 sideqalks or resident traffic area and are therefore a low risk for residents to trip over or fall into.	{C 160}		
{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 facility failed to maintain the ceilings in good repair. Findings on August 23, 2017 and 11-8-2017: b. The ceiling of the Women's bath was stained and spotted with mold. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. c. The ceilings of the Women's bath was cracked and flaking around the HVAC vent. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. 2. Observations revealed that the walls were not maintained in good repair. Findings on August 23, 2017 and 11-8-2017: a. Men's bath - the paint was flaking off the walls behind the toilets. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work.	{C 164}	Ceiling mold wiped + removed - ceiling painted Ceiling repaired + painted Paint on walls repaired	12/27/17 12/27/17 12/27/17

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{C 164}	Continued From page 2 4. Observations revealed that the floors were not kept clean and in good repair. Findings on August 23, 2017 and 11-8-2017: b. The VCT flooring is stained and heavily scuffed throughout the facility. The tile adhesive is seeping through the seams throughout the rooms. The living room tile has scratch marks across the length of the room. Interview with Staff revealed that the Owner had completed some repairs, but had not finished all of the work. New finding on 11-8-2017; There is now a sign on the door to the women's bathroom stating "OUT OF ORDER."	{C 164}	tile adhesive cleaned + tile floor to be stripped + waxed toilets fixed	11/31/18 12/23/17
{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: New finding on 11-8-2017: Based on observation, the fire alarm system was showing a "Trouble" condition #2. Further investigation revealed that a #2 trouble condition means the secondary telephone line was not working. Fire alarms in "Trouble" may fail to operate properly or notify the local fire department	{C 189}	Fire System Repaired Smoke ~~detectors~~ detectors replaced	12/19/17.

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(C 189)	Continued From page 3 when needed. 3. Observations revealed that the doors were not maintained in operating condition. Findings on August 23, 2017: a. Janitor's closet-the top hinge of the door to the closet was damaged making the door difficult to open and close. Interview with Staff revealed that the Owner was responsible for completing the repairs and she did not know why the door had not been repaired. New Finding on 11-8-2017; The interior side of the door frame to the janitor's closet was badly damaged and parts were missing. 5. Observations revealed that the mechanical equipment was not maintained in operating condition. This affects the residents, staff and visitors by not providing climate control in affected areas. Findings on August 23, 2017 and 11-8-2017: a. Two of four radiation dampers observed in the HVAC ducts in the ceilings had been activated. Locations include the Women's bath and the hall near the kitchen. At the time of the follow up survey, a third radiation damper in the dining room by the corridor wall was also observed to be closed. Interview with Staff revealed that the Owner was responsible for completing the repairs and she did not know why the mechanical vents had not been repaired. 7. Based on observations, the exterior of the building was not maintained. Findings on August 23, 2017 and 11-8-2017:	(C 189)	Door repaired on Janitor closet ordered (30) 165° fuse links - to be replaced	12/18/17 1/12/18

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{C 189}	Continued From page 4 b. A section of the exterior siding was loose and separating from the building above and to the left of the entrance at the office. Interview with Staff revealed that the Owner was responsible for completing the repairs. Some of the exterior repairs had been completed and they were working on the remaining citations. c. At the air handling unit outside the office, there are gaps in the soffit panels around the duct penetrations leaving holes for pests to enter. Interview with Staff revealed that the Owner was responsible for completing the repairs. Some of the exterior repairs had been started and they were working on completing the repairs.	{C 189}	ext siding was repaired will repair all voids with appropriate material	12/21/17 1/31/18
{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 a minimum of 100 degrees F at all fixtures used by residents. Findings on August 23, 2017 and 11-8-2017:	{C 195}		

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{C 195}	Continued From page 5 a. The water temperature taken at the Men's bath was 95 degrees F. Interview with Staff revealed that they were getting readings between 100 and 115 degrees. She stated that when the residents showered, the water temperature dropped.	{C 195}	will do weekly temp checks to verify temps are to maintain 100° at use - If necessary will replace Heater	1/31/18.