STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL079002	A. BUILDING: **01** B. WING _____	**01/04/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HIGHGROVE LONG TERM CARE CENTER	**2135 S SCALES 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 Report of a Construction Section Biennial Survey by Ed Miller conducted on January 4, 2018. Records indicate this facility was first licensed on 11/18/1987 as a HA. This facility is currently licensed for 62 Beds. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1978 (Revision 8) Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1987 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited that require a Plan of Correction.	C 000		
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and This Rule is not met as evidenced by: 1. Based on observation, the building did not provide exit door locks that are easily operable, by a single hand motion, from the inside at all times. This would affect residents, staff, and visitors by requiring more time to exit the building during an emergency. Findings on January 4, 2018:	C 153		

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C 153	Continued From page 1 a. Exit near Bedroom 9B- the replacement door handle has a thumb button/turn that must be operated before the door handle could release the door.	C 153		
C 156	Soil Utility Room SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (j) Soil Utility Room. A separate room shall be provided and equipped for the cleaning and sanitizing of bed pans and shall have handwashing facilities. This Rule is not met as evidenced by: 1. Based on Observation, the soiled utility room is not equipped for the cleaning and sanitizing of bed pans as required by this current Rule and by the 1987 Minimum Standards. Findings on January 4, 2018: a. Soiled Utility Room - the utility sink has been removed.	C 156		
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	C 164		

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C 164	Continued From page 2 mechanical systems are not kept clean and in good repair. Findings on January 4, 2018: a. Kitchen Pantry - the HVAC return with its radiation damper has an excessive accumulation of dust/lint.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (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 Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on January 4, 2018: a. Nurse Office - seven portable medical oxygen cylinders are stored standing up in beverage crates not secured. b. Bedroom 26 - one portable medical oxygen cylinder is stored standing up not secured. c. Bedroom 21 - sixteen portable medical oxygen cylinders are stored standing up in beverage crates not secured. 2. Based on observation, the Building plumbing equipment was not maintained in a safe manner by not have properly working parts. Findings on January 4, 2018: a. Bath near Bedroom 17 - the connection of the	C 166		

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C 166	Continued From page 3 commode to the floor is loose.	C 166		
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 Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on January 4, 2018: a. Mech Room 1 - the sample tubes for the HVAC duct mounted smoke detector(s) are dirty, and my not detect the existence of smoke in the air stream. b. Mech Room 3 - the sample tubes for the HVAC duct mounted smoke detector(s) are dirty, and my not detect the existence of smoke in the air stream. c. Mech Room 5 - the sample tubes for the HVAC duct mounted smoke detector(s) are dirty, and my not detect the existence of smoke in the air stream. d. Mech Room 6 - the sample tubes for the HVAC duct mounted smoke detector(s) are dirty, and my not detect the existence of smoke in the air stream.	C 189		

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C 189	Continued From page 4 e. Mech Room 7 - the sample tubes for the HVAC duct mounted smoke detector(s) are dirty, and my not detect the existence of smoke in the air stream. f. Mech Room in Lanudry - the HVAC duct mounted smoke detector had no access doors to inspect and clean the duct detector's sample tubes. Dirty sampling tube may become obstructed and my not detect the existence of smoke in the air stream. 2. 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 January 4, 2018: a. Exit near 4B - the exit sign did not illuminate on backup power when tested. 3. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on January 4, 2018: a. Smoke Barrier near Bedroom 15 - the back leaf, of the cross-corridor double-egress doors, hits the doorframe and did not completely close, and latch. 4. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on January 4, 2018: a. Bedroom 9B Closet - there is a gap around a cable not firestopped as it penetrates the	C 189		

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C 189	Continued From page 5 fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. b. Bedroom 9B - the heat detector did not completely cover the hole penetrating the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. c. Bedroom 5B Closet - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. d. Janitor near 5B- there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. e. Dining - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. f. Draftstop near Bedroom 10 - there is a gap around a cable. g. Firewall near Bedroom 15 - there is a gap around a cable not firestopped as it penetrates the firewall. h. Draftstop near Bedroom 5B - there are 2-two inch PVC sleeves through the draftstop. i. Draftstop near Bedroom 6B - there are 2-two inch PVC sleeves through the draftstop.	C 189		