

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060059	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/10/2018
NAME OF PROVIDER OR SUPPLIER CUTHBERTSON VILLAGE AT ALDERSGATE		STREET ADDRESS, CITY, STATE, ZIP CODE 3800 SHAMROCK DRIVE CHARLOTTE, NC 28215		
(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 Construction Section Biennial Survey by Dennis Harrell on 1-10-2018. Records indicate this facility was licensed on 11-9-1999, serving 45 Special Care residents. The facility is currently licensed for 61 beds. Therefore the facility must meet the 1996 Rules for the Licensing of Adult Care Homes, the 1996 North Carolina State Building Code; Section 409 Institutional Occupancy - Group I, and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds.	C 000		
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: Based on a review of documents, the records available onsite failed to meet the requirements listed in the rule above. Findings on 1-10-2018; a. Most of the records did not include the time of the rehearsal. b. Some of the records did not include the shift of	C 185	C185a As a result of the inspection held on 1/10/18, it was determined that our Director of Facilities Services had not properly conducted quarterly fire drills per regulation. Per the plan of correction being developed, this individual failed to accomplish the drills with required documentation. With the onboarding of a new Director of Facilities Services and reassignment of responsibility for Security Services, the quarterly fire drills were reinitiated. The quarterly fire drill for Cuthbertson Village, to achieve compliance, was conducted on 2/20/18 and 2/21/18 for each shift.	2/20/18 & 2/21/18

Division of Health Service Regulation

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

Jeff Weatherhead

TITLE

Assisted Living Administrator

(X6) DATE

02.21.18

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C 185	Continued From page 1 the rehearsal. c. All of the records had an incomplete list of staff members present. d. All of the records included little to no description of what the rehearsal involved.	C 185			
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 facility was not maintained in a safe condition because staff were not aware of the location and/or operation of emergency release equipment designed to facilitate an evacuation in an emergency. Untrained staff could delay or prevent an evacuation in an emergency. Findings on 1-10-2018; a. Only one staff member in the facility was aware of the existance and locations of the central emergency release switches for the Special (magnetic) locking. b. Most staff members had considerable difficulty operating the keyed emergency release switches located at all the exits. 2. Based on observation, the facility was not maintained in a safe and operating condition	C 189	C189 a. Inservicing with staff on the unit was completed on 1/14/18, regarding understanding and demonstration of location and ability to retrieve the key to the central mag lock device. The Maintenance Department marked the key to make easily identifiable to staff in the case of emergency, including in the event of darkness. This was completed on 1/15/18. Random checks and inservicing will be conducted quarterly to ensure staff are knowledgeable and can demonstrate operation of the central mag locking device. The next inservice will be conducted in March 2018. See attached inservicing support documentation. 2. The magnetic lock on the staff entrance was repaired on 1/10/18. See attached invoice verifying the work performed. Additionally, an alternative gate has been ordered that will function better given the use which will minimize the malfunctions.	1/14/18 1/15/18 3/18 1/10/18	

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C 189	Continued From page 2 because the magnetic lock on the staff entrance gate to the Hummingbird Cafe was not operational and would not lock. Gates that are not secure could allow resident elopement. 3. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include; a. One of the smoke barrier doors near Cardinal Trail was damaged. b. The door to the Clinical Care Co-ordinator's office was wedged open. c. A wedge was found at the door to the Health Unit Co-ordinator's office. d. The door to bedroom 7 was propped open. e. The doors to rooms 7, 16, 17, 18, 29, 33, 43, 45 and the beauty salon do not fit the opening properly to be resistant to the passage of smoke. 4. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. Holes by wires in the walls of the storage closet off the Chapel, b. Holes in the ceiling of mechanical room 161, c. Holes in the wall of electrical room 162, d. Hole in the wall of mechanical room 1071, e. Unsealed conduit sleeve through the ceiling in mechanical room 1071, f. Unsealed conduit sleeves (3) through the	C 189	C189 3.a. The smoke barrier door near Cardinal Trail was repaired by staff of 1/10/18. b.&c. Door wedges were removed on 1/10/18 and until alternative hold open devices are installed, the doors will remain closed. d. The doors to rooms 7, 16, 17, 18, 29, 33, 43 and 45 were repaired on 1/10/18 and 1/11/18 with installation of weather stripping. All other doors have been inspected and weatherstripping installed where necessary. 4.a.b.c.d. The penetrations noted were sealed with approved caulking and all completed on 1/17/18. e.& f. The unsealed conduit sleeves were sealed with the approved caulking material and completed on 1/17/18.	1/10/18 1/10/18 1/10/18 & 1/11/18 1/17/18 1/17/18

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C 189	Continued From page 3 ceiling in the data closet, g. Hole, approximately 12 inches by 16 inches, in the wall near the sun porch, h. Ceiling damaged on the sun porch.	C 189	C189 g. The hole created when replacing a faulty smoke head was sealed on 1/17/18. h. The porch ceiling in question was patched and painted while awaiting warranty work to locate exact source of water leak from the roof.	1/17/18 Uncertain of the date



Fire Drill Evaluation Report



<u>Cuthbertson Village</u>	<u>3200 Bishop's Way Ln.</u>	
Facility Name	Facility Address	
<u>Elizabeth Rookwood</u>	<u>4/20/18</u>	<u>3:35 pm</u>
Facility Contact	Date	Time of Day ^{2nd} Shift
<u>Lori Fuhr</u>	<u>704-532-5420</u>	<u>CV-A</u>
Drill Evaluator	Telephone	Area / Floor(s) of drill

All persons removed from fire room or immediate danger to a safe location	10	7	4	0
Door to fire room and doors to other areas closed but not locked	10	7	4	0
Fire alarm activated without delay or automatic activation occurs	10	7	4	0
Fire location communicated to other staff by public address system or other means	10	7	4	0
Staff reports to area of alarm origin to assist and search or begins assigned duties	10	7	4	0
Hallways, corridors, exit doors and all paths of egress cleared of obstructions	10	7	4	0
A staff person took charge and made assignments as necessary	10	7	4	0
All fire doors and other life safety equipment operated properly	10	7	4	0
Staff called 9-911 and Security 7045	10	7	4	0
Call from monitoring company to 911 – received _____ (within 2 minutes)	10	7	4	0
Time:	Up to 4min =5			
	4:01 – 5:30 =2	5	2	0
Min <u>3</u> Sec <u>15</u>	>5:30 =0			
Score – Add columns together and enter total				%
(100-93-Very Good) (92-82-Good) (81-70-Acceptable) (69 and below – Unacceptable and will be redrilled)				

Lori Fuhr

Safety Committee Observer 1

Safety Committee Observer 2

Comments:

Staff responded appropriately. Demonstrated knowledge in RACE procedure to include evacuation of residents, pulling fire alarm, proper use of extinguishers, notifying security/fire dept. Reminded staff to do head count after all clear is issued.

FIRE DRILL ATTENDANCE ROSTER

The following Aldersgate employees participated in a fire drill at Cuthbertson - A wing

on this date 2/20/18

2nd Shift
3:55 pm

Alaska Wallace
Barbara Clarke
for R. R. R.



Fire Drill Evaluation Report



Cuthbertson Village
Facility Name

3200 Bishops Way Lane
Facility Address

Elizabeth Rookwood
Facility Contact

2/20/18
Date

2:15 pm - 1ST
Time of Day SHIF

Randy Cook
Drill Evaluator

704-532-7076 CV-B
Telephone Area / Floor(s) of drill

All persons removed from fire room or immediate danger to a safe location	10	7	4	0
Door to fire room and doors to other areas closed but not locked	10	7	4	0
Fire alarm activated without delay or automatic activation occurs	10	7	4	0
Fire location communicated to other staff by public address system or other means	10	7	4	0
Staff reports to area of alarm origin to assist and search or begins assigned duties	10	7	4	0
Hallways, corridors, exit doors and all paths of egress cleared of obstructions	10	7	4	0
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Staff called 9-911 and Security 7045	10	7	4	0
Call from monitoring company to 911 - received (within 2 minutes)	10	7	4	0
Time: Up to 4min =5 4:01 - 5:30 =2 Min <u>4</u> Sec <u>30</u> >5:30 =0		5	2	0
Score - Add columns together and enter total				%
(100-93-Very Good) (92-82-Good) (81-70-Acceptable) (69 and below - Unacceptable and will be redrilled)				

Lou Furr

Safety Committee Observer 1

Julie [Signature]

Safety Committee Observer 2

Comments:

Staff responded well, evacuated resident from room, closed door to room, simulated pulling alarm & clearing area. Reminded staff to do head count after all-clear is issued.

FIRE DRILL ATTENDANCE ROSTER

The following Aldersgate employees participated in a fire drill at Aldersgate Cuthbertson
on this date 2/20/18 Village

Zippay Holmes CNA/MT
 John Alex CNA/MT



Fire Drill Evaluation Report



<u>Aldersgate</u>	<u>3200 Bishops Way Ln</u>	
Facility Name	Facility Address	
<u>Elizabeth Crookwood</u>	<u>2/21/18</u>	<u>0650 - 3rd shift</u>
Facility Contact	Date	Time of Day
<u>Julie Nottingham</u>	<u>704-532-3420</u>	<u>CV - C wing</u>
Drill Evaluator	Telephone	Area / Floor(s) of drill

All persons removed from fire room or immediate danger to a safe location	10	7	4	0
Door to fire room and doors to other areas closed but not locked	10	7	4	0
Fire alarm activated without delay or automatic activation occurs	10	7	4	0
Fire location communicated to other staff by public address system or other means	10	7	4	0
Staff reports to area of alarm origin to assist and search or begins assigned duties	10	7	4	0
Hallways, corridors, exit doors and all paths of egress cleared of obstructions	10	7	4	0
A staff person took charge and made assignments as necessary	10	7	4	0
All fire doors and other life safety equipment operated properly	10	7	4	0
Staff called 9-911 and Security 7045	10	7	4	0
Call from monitoring company to 911 – received _____ (within 2 minutes)	10	7	4	0
Time: Up to 4min =5 4:01 – 5:30 =2 Min ____ Sec ____ >5:30 =0		5	2	0
Score – Add columns together and enter total				%
(100-93-Very Good) (92-82-Good) (81-70-Acceptable) (69 and below – Unacceptable and will be redrilled)				

Julie Nottingham
Safety Committee Observer 1

Safety Committee Observer 2

Comments:

Conducted a Simulated Fire drill. Overall all procedure were followed correctly. Nurse Ninguna had trouble locating the pull stations and lost track of procedure at a "head count"

FIRE DRILL ATTENDANCE ROSTER

The following Aldersgate employees participated in a fire drill at Cuthbertson Village C-wing
on this date 2-21-18 6:50 a.m.

6:50 a.m.
3rd shift

[illegible]

Lesson Plan

Topic: Fire & Safety Preparedness

Date: January 10, 2018

Presenter: Elizabeth Rookwood, RN Clinical Care Coordinator

CC: All Shift Supervisors

Fire Inspection survey was conducted in Cuthbertson Village on January 10, 2018 and the following were areas that warranted training;

- Staff took some time to locate keyed switch keys to open (emergency boxes by exit doors
- Staff were not aware of location of central mag lock switches

Agenda

All staff will receive inservice by the RN and or Supervisors on the importance of quick retrieval of keys.

All staff will be shown the location of "central box" (these boxes are located in the kitchen area except Cardinal Trail in which is at the Nursing desk area)

Emergency keys will be marked and chiseled for staff ability to quickly identify the key even in the dark.

Staff informed that random test will be done to ensure a quick retrieval of keys is observed and as well verbalizing and showing the location of the Central box.

Staff as well will know where all the emergency boxes are located on their units (by all exit doors including in the dining room and outside in the Town Square.

ALDERSGATE IN-SERVICE RECORD

Topic: Fire + Safety - ① Staff must be aware of location of central mag log switches
Date: Starting 1-10-2018 ② Staff must be able to retrieve emergency keys quickly when asked or being observed
Dept: Nursing ③ Keys (emergency) will be checked in order to be identified quickly
Presenter: Elizabeth Rookwood RN **Presentation time:** _____

PRINT NAME AND TITLE	SIGNATURE	SHIFT/UNIT
Tisha Alexander CNA/MT	Tisha Alexander	7-3/B
Tiffany Holmes CNA/MT	Tiffany Holmes	7-3/B
Cynthia Logie CNA/MT	Cynthia Logie	7-3/A
Rahel Gebremeskel	Rahel Gebremeskel	7-3/11
Rosale Williams	Rosale Williams	7-3
Judy Wallace	Judy Wallace	7-3
FAUSTINA MYERS CNA/MT	faustina Myers	3-11 C
MILDRED ANDERSON	Mildred Anderson	7-3-D
Margaret Ilies	Margaret Ilies	7-3
Tiffany Cooper	Tiffany Cooper	3-1 D
Ashen Gnabaly	Ashen Gnabaly	3-11 D
Bansam Clarke	B. Clarke	3-11-A
Tylasha Wallace CNA/MT	Tylasha Wallace	3-11 A
Knastacia Brooks CNA/MT	K. Brooks	3-11 B
Champagne Green	Champagne Green	3-1 B
GERTRUDE SHERBO	Gertrude Sherbo	11-7 B
ARACELI YMA LAGA	Araceli Yma Laga	11-7 A
Kim Harvey	Kim Harvey	Supervisor 2nd

ALDRSGATE IN-SERVICE RECORD

Topic: Fire & Safety - Recent Inspection

Date: continued

Dept: Nursing

Presenter: Sharon Tugavala Presentation time: _____

PRINT NAME AND TITLE	SIGNATURE	SHIFT/UNIT
Perla Houston	Perla Houston	3rd - A
Virginia Njuguna	Virginia Njuguna	3rd - C
Linda Scriven CNA/MedTech	Linda Scriven	3rd - C
Blanche Nuanna	Blanche Nuanna	3rd - B
Kimberli Grimes Med Tech	Kimberli Grimes	3rd B
Charlotte Ngoo	Charlotte Ngoo	3rd B
Sametta Birge	Sametta Birge	2nd
Felicia Odum	Felicia Odum	3rd A
Eunice Omale	Eunice Omale	2nd C
Robert Atkins	Robert Atkins	3rd - D
Merial Hill	Merial Hill	3rd -
Hilda Bonke	Hilda Bonke	1st/ALL
Ann Mayo	Ann Mayo	3rd
Monique Patterson	Monique Patterson	3rd
McKenzie Dinning	McKenzie Dinning	1st/2nd
Anta Nwankwo	Anta Nwankwo	First
Sherrice Ross	Sherrice Ross	1st shift 1st PP.



Seeley Technology Inc.

P.O. Box 915
Bessemer City, NC 28016
980-533-8053
service@seeley.tech

Invoice

Invoice # 531
Invoice Date 1/10/2018
Due Date 2/9/2018
P.O. #
Terms Net 30
Project

Bill To:

Aldersgate
Brandon Thomas
3800 Shamrock Dr.
Charlotte, NC 28215

Date	Item	Description	Hours/Qty	U/M	Rate	Amount
1/10/2018	Aldersgate/...	Repair Mag Lock at CV back gate	2.5		70.00	175.00

Total	\$175.00
Payments/Credits	\$0.00
Balance Due	\$175.00

Please make checks payable to Seeley Technology Inc.
THANK YOU FOR YOUR BUSINESS !!!