

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>HAL018023</b>                           | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: <b>01</b><br><br>B. WING: _____                                      | (X3) DATE SURVEY COMPLETED<br><br><b>R</b><br><b>03/01/2018</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>AUSTIN ADULT CARE</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>511 BUMGARNER INDUSTRIAL DRIVE<br/>CONOVER, NC 28613</b> |                                                                                                                 |                                                                 |
| (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<br><br>Report of a Biennial Follow Up Construction Survey by Ed Miller, conducted on March 1, 2018.<br><br>Deficiencies were cited that require a new Plan of Correction.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | (C 000)                                                                                              |                                                                                                                 |                                                                 |
| (C 180)                                                      | Outside Premises-Clean, Safe<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT<br>(m) The requirements for outside premises are:<br>(1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the outside grounds were not maintained in a safe condition. This affects the safety of the residents and staff.<br><br>Findings on March 1, 2018:<br>b. The sidewalk leading to the basketball goal was broken and cracked creating a possible tripping hazard. Based on observation, the sidewalk remained the same except part of the side is now removed for the installation of a drainpipe. Interview with Staff revealed that the Owner does not have significant maintenance staff to cover this building plus the three additional buildings that the owner has.<br>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 sidewalks or resident traffic area and are therefore a low risk for residents to trip over or fall into. | (C 180)                                                                                              | Sidewalk will be removed to prevent a trip hazard<br><br>Grease pit lid will be replaced                        | 4/30/18<br><br>4/30/18                                          |

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Patricia Beckman*  
STATE FORM 70

*Administrative*  
0000 VUMJ24

*4/30/18*

If continuation sheet 1 of 4

Division of Health Service Regulation

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| (C 164)                                                      | Continued From page 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | (C 164)                                                                                               |                                                                                                                                                                                                                                                          |                                                          |
| (C 164)                                                      | <p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT<br/>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <ol style="list-style-type: none"> <li>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</li> <li>(2) have no chronic unpleasant odors;</li> <li>(3) have furniture clean and in good repair;</li> </ol> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>4. Observations revealed that the floors were not kept clean and in good repair.</p> <p>Findings on March 1, 2018</p> <p>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 does not have significant maintenance staff to cover this building plus the three additional buildings that the owner has.</p> <p>New Findings on March 1, 2018</p> <p>c. The VCT flooring throughout the facility is covered with a thin layer of red clay dust. The installation of the drainpipes in the yard appears to be the source of the dust. Most of the drainpipe ditches have been filled in, but they are not graded and seeded. As a result, when it rains, red clay silt laden water flowing back towards the building, where it is tracked into the building. The walk off mats at the doors have not been changed in some time compounding the issue.</p> | (C 164)                                                                                               | <p>Flooring is being priced to cover hallway, Dining Room Day Room - pricing is being looked at + decision to cover existing floor will be made.</p> <p>seeding / straw will be completed to help with red clay - new rug at door will be purchased.</p> | 4/30/18                                                  |

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| (C 189)<br>(C 189)                                           | Continued From page 2<br>Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (c) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>7. Based on observations, the exterior of the building was not maintained.<br><br>Findings on March 1, 2018:<br>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.<br><br>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. | (C 189)<br>(C 189)                                                                                    |                                                                                                                 |                                                                 |
| (C 195)                                                      | Hot Water System<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | (C 195)                                                                                               | Siding will be repaired to prevent pests at duct work - all loose siding will be repaired.                      | 4/30/18                                                         |

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| (C 195)                                                      | <p>Continued From page 3</p> <p>F (46.7 degrees C).</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>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.</p> <p>Findings on August March 1, 2017:</p> <p>a. The water temperature taken at the Men's bath was 94 degrees F. The water temperature taken at the Women's bath was 120 degrees F. Interview with Staff revealed that they have one small water heater and it is located near the Women's Bath. The one hot water heater is not supplying the required hot water temperatures for either bathroom.</p> | (C 195)                                                                                              | <p>A mixing valve is on order should arrive by 4/8/18 -</p> <p>All temps will be adjusted to accommodate min 100 degrees not to exceed 115.</p> | 4/30/18.                                                        |