

PRINTED: 05/25/2018
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092203	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/17/2018
NAME OF PROVIDER OR SUPPLIER CHATHAM COMMONS		STREET ADDRESS, CITY, STATE, ZIP CODE 809 WEST CHATHAM STREET CARY, NC 27512		
(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 Biennial Follow Up Construction Survey by Suzanna Fay and Frank Strickland conducted on May 17, 2018. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	(C 000)		
(C 101)	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all of the required components or procedures to properly operated doors equipped with Special Locking Arrangements. This could affect all occupants who would need to evacuate through the door(s).	(C 101)		

Division of Health Service Regulation

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

TITLE

(X6) DATE

*Sharon Cox**Executive Director**6/7/2018*

STATE FORM

4000

CU5222

If continuation sheet 1 of 5

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{C 101}	Continued From page 1 Findings on May 17, 2018: a. SCU- the exit door by Room 424 did not release with the master manual override switch located in the nurses' station.	{C 101}	Rear exit door in the SCU has been repaired by readjustment of the sensor detectors, and is operational for release in the SCU unit.	05/31/18
{C 143}	Janitor's Closets-Locked SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be monitored while in use; This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not having separate locked areas for substances that may be hazardous if ingested, inhaled or handled. This deficiency affects all residents, who may accidentally use or come in contact with one of these hazardous substances. Findings on May 17, 2018: a. Exterior Storage Building near SCU- the door was not locked and left open. There is substances that may be hazardous if ingested, inhaled or handled stored in the building.	{C 143}	Exterior Storage Building has been evacuated of all chemicals and cleaning supplies. Cleaning supplies have been stored in janitorial closets.	05/31/18
{C 160}	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are:	{C 160}		

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{C 160}	Continued From page 2 (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 are not maintained in a clean and safe condition. Findings on May 17, 2018: a. Exterior Storage Building near SCU - there was broken glass on the ground adjacent to this building.	{C 160}	The grounds adjacent to the Exterior Building near the SCU have been completely cleared of all glass.	05/31/18	
{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 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 May 17, 2018: a. Bedroom 419 Closet - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. b. Bedroom 204 left-side Closet - there is a gap	{C 189}	(A&B) Gaps around the cables in room closets of #419 and #204 have been repaired. (C) The gap around the cable of the water heater in the electrical room has been repaired, and all unsealed conduits on the ceiling near the water heater have been repaired.	05/31/18	

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