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
	HAL093001	A. BUILDING: 01 B. WING _____	06/14/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BOYD'S REST HOME # 2	295 CARROLLTOWN ROAD MACON, NC 27551

(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 conducted by Suzanna Fay on June 14, 2018. This facility was first licensed on July 1, 1972 as a Home for the Aged serving 10 residents. Therefore, this facility must meet the 1971 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes and the 1967 North Carolina State Building Code, Section 407, Group D- Institutional. Deficiencies have been cited and a Plan of Correction is required.	C 000		
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 furnishings were not kept in good repair. Findings on June 14, 2018: a. Room 3B - the left closet door does not close. b. Janitor Closet - the door hardware is loose. c. Bedroom 5B - the bedroom door drags on the frame making is difficult to open and close. 2. Observations revealed that the walls and ceilings are not kept in good repair.	C 164	Closet door fixed Bedroom door fixed Janitor door fixed	all 6/27/18

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: AG Brackett TITLE: Co-Admin (X6) DATE: 7/17/18

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C 164	Continued From page 1 Findings on June 14, 2018: a. Room 5B - the ceiling around the smoke detector is damaged. b. Residents' Restroom - the caulking around the tub perimeter was pulling loose and mildew was forming in the gaps.	C 164	Smoke Ceiling repaired Perimeter around tub caulked	6/27/18 6/27/18
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. Observations revealed that the facility was not maintained free of hazards. Loose flooring can cause injury from falls. Findings on June 14, 2018: a. The threshold was not secure at the exit from the Laundry Room addition. 2. Observations revealed that the building exits were not maintained in a safe manner. Doors that are difficult to open and obstructions along the exit path hinder the ability to evacuate in a timely manner in the case of a fire or other emergency. Findings on June 14, 2018: a. The basement level exit door was sticking in the frame and difficult to open.	C 166	basement door fixed	7/2/18

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C 166	Continued From page 2 b. There was a stack of shingles and other construction material stacked on the porch at the top of the steps at the basement level exit.	C 166	Singles removed	7/2/18
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 observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be effected if the equipment failed to alert the occupants in case of a fire. Findings on June 14, 2018: a. At the time of survey, the fire alarm panel was without power. A test of one smoke detector using canned smoke was conducted and the system failed to alarm. The monitoring company indicated that they had not received any signals since June 10, 2018. Staff contacted the vendor for repairs. A message was left with the Fire Marshal's office and the facility was placed on fire watch. b. In addition to the monitored fire alarm system, the facility has smoke detectors with battery back-up in the hallways and in each bedroom.	C 189	New fire alarm system installed	6/21/18

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C 189	Continued From page 3 The batteries have been removed from all of the smoke detectors. 2. Observations revealed that the mechanical equipment was not maintained in good repair. Findings on June 14, 2018: a. The dryer cap at the back of the facility has pulled away from the building, taking the sealant with it and leaving a gap in the exterior wall for pests to enter. b. The dryer cap for the duct extending through the side wall is missing. c. Kitchen - the filters on the kitchen range hood have a heavy accumulation of grease. 3. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings and walls could allow fire and smoke to spread beyond the area of origin. Findings on June 14, 2018: a. Basement pantry - there is a hole in the ceiling around the heat detector. b. Water heater room - there are four unsealed penetrations along the back wall. c. Basement hallway - there is a small hole, approximately 2" wide in the ceiling to the right of the stair. d. Basement stair - there is a red pipe penetrating the wall of the stair that has not been sealed. 4. Observations revealed that the electrical equipment was not maintained in a safe operating condition.	C 189	Batteries installed Will complete On/by..... Will complete on/by.....	6/21/18 7/31/18 7/31/18

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C 189	Continued From page 4 Findings on June 14, 2018: a. Water Heater Room - the electrical outlet to the right of the abandoned water heater does not have a cover plate. 5. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on June 14, 2018: a. The exit light/sign at the door leading into the kitchen was not illuminated nor did it illuminate on battery test. b. Kitchen - the exit light/sign at the exterior door did not illuminate on battery back up. 6. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection. Findings on June 14, 2018: a. The fire extinguishers are not being inspected monthly by the in-house staff. b. The kitchen suppression system is not being inspected monthly by in-house staff. c. The kitchen suppression system's last 6 month inspection and test by a qualified vendor was performed in August of 2017. 7. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if	C 189	Exit light batteries replaced, now working Fire extinguishers/ and kitchen suppression system inspected	6/21/18 6/21/18

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C 189	Continued From page 5 doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on June 14, 2018: a. The door separating the kitchen from dining is damaged at the hinge and does not close and latch. 8. Observations revealed that the plumbing equipment was not maintained in a safe operating manner. Findings on June 14, 2018: a. Resident Restroom - the toilet was loose.	C 189	Door hinge fixed Toilet has been fixed	7/2/18 7/2/18
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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. Observations revealed that the facility had a portable electric heater in one room. Findings on June 14, 2018: a. Room 5B - there was a portable electric heater under the sink.	C 191	Heater removed	6/14/18

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C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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. Observations revealed that exhaust ventilation was not provided in required areas. Findings on June 14, 2018: a. Visitor Restroom - the exhaust fan was not working at the time of survey.	C 199	Will fix exhaust fan by	7/31/18