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
	HAL096004	A. BUILDING: 01 B. WING _____	06/07/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WAYNE COUNTY REST VILLA NO 2	305 SOUTH VANCE STREET EUREKA, NC 27830

(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 This is a Report of a Construction Section Biennial Survey conducted by Suzanna Fay on June 7, 2018. This facility was first licensed as a Home for the Aged serving 12 residents on August 8, 1995. Therefore, the facility must meet the 1984 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds and the 1991 North Carolina State Building Code Section 409- Institutional Occupancy. Deficiencies were noted 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 maintained in good condition. Findings on June 7, 2018: a. Room 6 - the door is dragging on the floor and scraping the surface of the vinyl. b. The handrail between Rooms 2 and 3 is loose. The bracket is broken and the rail is no longer level.	C 164	* Room #6, Door has been Repaired from dragging 6/15/2018 * Handrail between room # 2 and 3 has been tighten. Housekeeper will check Daily 6/30/2018	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Lorraine Best Adm. 6/27/2018

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C 166	Continued From page 1	C 166		
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. Findings on June 7, 2018: a. The rug at the exit by Room 6 is worn and the edges are curling creating a trip hazard. 2. Based on observation the facility was not maintained free from hazards. Oxygen bottles that are improperly stored may present a danger to the occupants of the facility. Findings on June 7, 2018: a. Room 3 - in the left closet, two oxygen tanks were sitting, unsecured on the floor of the closet. Three full oxygen tanks were on the closet shelf in a Pepsi crate.	C 166	* The rug at the EXIT Door by room #6 has been replaced. 6/8/2018 * contracted to Bring the correct container to store oxygen bottles. Oxygen Bottles were place on the Bottle Shelf. 6/15/2018 Supervisor will monitor this area weekly. 6/15/2018	
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	C 189		

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C 189	Continued From page 2 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 7, 2018: a. At the time of survey, the fire alarm panel was indicating trouble and the system was in silence mode. When the system was taken off of silence, the panel began to emit a beeping sound indicating trouble. A smoke detector was sprayed with canned smoke and the alarm failed to sound. A call to the monitoring company revealed that they did not have a trouble signal on their end. Villa No. 1 and No. 2 share a communicator. The Fire Marshal's office was notified that the fire alarm systems were down. The surveyor requested that the facility proceed with a fire watch. The vendor was contacted for repairs. 2. 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 could allow fire and smoke to spread beyond the area of origin. Findings on June 7, 2018: a. Room 1 - the attic hatch is worn along the edge and is no longer covering the opening.	C 189	The fire alarm System was repaired Immediately. By Allstate fire protection Online computer Austin Security. System will be monitored By the managen Daily 6/14/2018 Room #1 attic hatch was repaired. 6/15/2018	