

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL078068	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 07/25/2018
NAME OF PROVIDER OR SUPPLIER GREENBRIER OF FAIRMONT		STREET ADDRESS, CITY, STATE, ZIP CODE 703 S. WALNUT STREET FAIRMONT, NC 28340		
(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 Biennial Construction Section Survey report by Frank Strickland and Suzanna Fay on 07/25/2018: This facility was licensed on 04/29/1998 for One Hundred (80) Beds-52 AL & 48 SCU. Based on this information, we are requiring that this facility to meet the 1996 Minimum Standards and Regulations for Homes for the Aged; the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds; and the 1996 Edition of the North Carolina State Building Code, Section 409.1, Group I Unrestrained Occupancy. Deficiencies have been cited and a Plan of Correction is required.	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;	C 101		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1-Based on observations, this facility has not maintained the measures for the Special Locking (magnetic locks) on the exit doors as allowed by Section 1012.6 of the 1996 NC State Building Code. Section 1012.6.1. 4. F. requires, "If any required emergency release switch is of the locking type, all staff must carry emergency release switch keys." Findings on 07/25/2018: The required emergency release switch located at each magnetically locked exit door was of the locking type with keyed switching. All staff in the SCU who are responsible for evacuation of residents were not carrying keys. The med tech was the only staff member carrying a release switch key and the other staff that were interviewed carried no release switch keys. All staff who are responsible for the evacuation of the occupants must carry an emergency release key at all times when on duty.	C 101	<i>On 7-26-18 All Staff was giving Key's and trained on the process again.</i>	
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (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, this facility has failed to	C 160		

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C 164	Continued From page 3 (b) Room 112 (c) Room 120 (d) Room 303 (e) Room 308 3-Based on observation, this facility has not kept the interior bed furnishings clean and in good repair. Findings on 07/25/2018: The mattress in Room 107 is excessively dirty and needs replacement.	C 164	8/1/18 All doors not closing where adjusted to close and latch like they should.	
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-Based on observation, this facility has not kept clean, orderly, free of all obstructions and hazards. Findings on 07/25/2018: There are rags piled up in the corner that are located in the Outside Water Heater Room.	C 166	7/25/18 Mattress was removed placed a new mattress. Nursing staff is keep a eye and clean mattress regularly now.	
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 189	7/25/18 Rag was removed that day from room.	

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C 189	Continued From page 4 (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: 2-Based on observation, this facility has failed to maintain the fire safety construction in a safe and operating condition. Findings on 07/25/2018: The ceiling construction is damaged, that is located in the Outside Water Heater Room. 3-Based on observation, this facility has failed to maintain the fire safety construction in a safe and operating condition. Findings on 07/25/2018: Electrical conduits are penetrating the ceiling construction and the space around the conduits are not sealed, 4-Based on observation, this facility has failed to maintain the mechanical ventilation system in a safe and operating condition. Findings on 07/25/2018: The following locations have mechanical ventilation systems that are not exhausting odors: (a) Housekeeping Closet/200 HALL (b) Kitchen Mop Sink Closet (c) Community Bath/200 HALL	C 189	8/1/18 Ceiling was patched/covered and sealed wear hole was, 8/1/18 Conduits was recaulked and sealed with fire sealant. 8/2/18 House Keeping closet was replaced Motor's have been order for others.	

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C 189	Continued From page 5 5-Based on observation, this facility has failed to maintain the plumbing fixtures in a safe and operating condition. Findings on 07/25/2018: The toilet is not secured to the floor that is located in Room 104.	C 189	8/1/18 Toilet was tighten and stopped from moving. Maintenance Director Rocky Hodge Rocky Hodge 9/24/18		