

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034090	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/16/2018
NAME OF PROVIDER OR SUPPLIER CLEMMONS VILLAGE I		STREET ADDRESS, CITY, STATE, ZIP CODE 6401 HOLDER ROAD CLEMMONS, NC 27012		
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on November 16, 2018. Records indicate this facility was first licensed as a Home for the Aged serving 60 residents on 1-11-1996. Therefore, the facility is required to meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds; and the 1996 North Carolina State Building Code Section 409.1- Group I-2 Deficiencies were cited that require a Plan of Correction.	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, the Building does not	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 meet the code requirements in effect at the time of initial Licensing or alteration, by not providing all required exits or exit access doors with exit signs. This could affect residents, staff, and visitors by not providing egress directions for a prompt evacuation of the building. Findings on November 16, 2018: a. Dinning - this room does not have exit signs for all of its required exits.	C 101		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on November 16, 2018: a. Kitchen - there is a tray rack and many empty boxes, obstructing the exit. Deficiency corrected before Construction Surveyors departed site.	C 150		
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;	C 160		

Division of Health Service Regulation

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C 160	Continued From page 2 This Rule is not met as evidenced by: 1. Based on observation, the outside grounds were not maintained in a clean and safe condition. Findings on November 16, 2018: a. Wooden Stairs off Back Deck - several treads are loose and spongy making the stairs hazardous to traverse.	C 160		
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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on November 16, 2018: a. Entire Building - the ventilation system throughout the Facility with their radiation dampers have an excessive accumulation of dust/lint.	C 164		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION	C 185		

Division of Health Service Regulation

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C 185	Continued From page 3 (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with Executive Director/Administrator/Maintenance Director/Technician/Manager, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on November 16, 2018: a. In the 1st quarter for the last 12 months, no rehearsals were performed during 3rd shift. b. In the 3rd quarter for the last 12 months, no rehearsals were performed during 3rd shift. c. In the 4th quarter for the last 12 months, no rehearsals were performed during 1st and 2nd shifts.	C 185		
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)	C 189		

Division of Health Service Regulation

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C 189	Continued From page 4 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on November 16, 2018: a. Corridor near Bedroom 10 - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. b. Entire Building - the exit signs do not have test buttons to confirm backup power and there is no generator. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on November 16, 2018: a. Kitchen -since the last semi-annual maintenance of the commercial kitchen hood's fire suppression system, performed in July 2018, there has been no documentation of the monthly in-house/owner inspections. 3. 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 November 16, 2018: a. Riser room - there is a gap around a flue, not firestopped as it penetrates the	C 189		

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C 189	Continued From page 5 fire-resistance-rated ceiling assembly. b. Riser room - there a sprinkler pipe is sealed with gypsum tape as it penetrates the fire-resistance-rated ceiling assembly. Gypsum tape over a hole is not be approved to seal this type of penetration. 4. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on November 16, 2018: a. Bedroom 7 - the corridor door did not latch into its frame when closed. b. Bedroom 5 - the corridor door did not latch into its frame when closed. 5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on November 16, 2018: a. Nurse Station - electrical panel A has two open slots were breakers have been removed or blanks fell out. This allows access to energized components that are not guarded against accidental contact. 6. Based on observations, the Building was not maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler heads' spray cannot reach are area of a room. Findings on November 16, 2018: a. Basement Storage - items are being stored within the area 18 inches below the fire sprinkler head. 7. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin.	C 189		

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C 189	Continued From page 6 Findings on November 16, 2018: a. Bedroom 33 - the corridor door has a trashcan holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch. b. Laundry - the corridor door has a coat hanger holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch. 8. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Using medical equipment, high power loads such as space heaters, refrigerators, and microwave ovens with multiple power taps can overload building wiring is a fire hazard Findings on November 16, 2018: a. Bedroom 33 - an oxygen concentrator is plugged into a power tap. Power taps are not designed for medical equipment. b. Bedroom 36 - an oxygen concentrator is plugged into a power tap. Power taps are not designed for medical equipment.	C 189		
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;	C 199		

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C 199	Continued From page 7 (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. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on November 16, 2018: a. Bedroom 22 Bathroom - the required exhaust ventilation system did not work. b. Laundry - the required exhaust ventilation system did not work.	C 199		