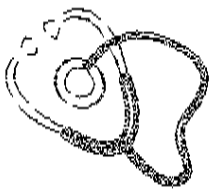

SEASONS
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1002 East Hwy. 54
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FAX: 919-484-8520
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Facsimile Transmittal

To: DHSR-Construction Section Fax: (919) 733-6592

From: Sommer Prestianni Date: 11/27/18

Re: Plan of Correction Pages: 7

CC: Felicia Byrd

Urgent For Review Please Comment Please Reply

Notes:

This Resident Information/Facsimile Cover Letter will be used for the transmission of any confidential resident information.

C:\Documents and Settings\Receptionist\My Documents\Fax Cover Sheet For back fax machine.doc

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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
	HAL032109	A. BUILDING: 01 B. WING _____	10/31/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on October 31, 2018. This facility was first licensed October 25, 1996 and currently serves fifty-one (51) Special Care Beds. Based on this information, we are requiring the facility to meet the 1996 Homes for the Aged and Disabled Minimum Standards and Regulations, the applicable portions of the 2005 Rules for 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 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. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on October 31, 2018: a. 100/200 Hall Courtyard - several of the aluminum soffit panels are not secure leaving gaps or holes in the exterior soffit for pests to enter.	C 160	Aluminum soffit panels have been fixed or replaced in the courtyard on 100/200	11-8-18

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Executive Director — (X6) DATE: 11-20-18

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C 164	Continued From page 1	C 164		
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 ceilings were not kept clean and in good repair. Findings on October 31, 2018: a. Service Hall - there are stains on the ceiling over the vending machines from a prior leak. The finish is cracked and is separating around the site of the leak. b. 300/400 Hall - Clean Utility - the ceiling around the supply vent has black mildew stains. There are mildew stains on the wall just below the vent as well. c. 300/400 Hall Storage Room - the ceiling around the supply vent has black mildew stains. 2. Observations revealed that the furnishings were not kept in good repair. Findings on October 31, 2018: a. 300/400 Hall Activity Room - the hinge is damaged on the cabinet door below the sink so that the door does not stay closed. A person could injure themselves hitting the door.	C 164	Silverado repaired crack and removed stains in the service hall ceiling. The ceiling around the supply vent on the 300/400 hall has been cleaned of any black mildew stains. The ceiling around the vent in the storage room on 300/400 hall has been cleaned of any black mildew stains. The hinge on the 300/400 hall Activity room cabinet door below the sink has been replaced.	11-19-18 11-9-18 11-8-18 11-6-18

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C 166	Continued From page 2	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 all obstructions and hazards. Findings on October 31, 2018: a. Most of the resident closets had sliding bolt latches on the doors. The closets are large enough for a resident to step inside and get trapped if someone slid the bolt.	C 166	Sliding bolt latches on all closet doors have been removed	11-1-18
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. Observations revealed that the life safety	C 189		

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C 189	Continued From page 3 equipment was not maintained in a safe and operating condition. Locked gates could trap residents and staff by not allowing them to get far enough away from the building in the case of a fire. Findings on October 31, 2018: a. There are two enclosed outdoor areas. The gates have a keyed lockset with the keys secured in a lockbox with a coded padlock. At the time of the survey, staff could not unlock the padlocks to access the key.	C 189	Padlocks and Keys have been replaced on the two enclosed outdoor areas.	11-9-18
	2. Observations revealed that the life safety equipment was not maintained in a safe and operating condition. Failure of the manual override switches to release the exit doors places the residents and staff in danger if the electronic system fails to release the doors. Findings on October 31, 2018: a. 300 Hall Sunroom exit - the manual override did not release the exit door.		The manual override switch has been replaced on the exit door on the 300 hall Sunroom.	11-1-18
	3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on October 31, 2018: a. The exit light/sign over the front door did not illuminate on battery test.		The exit light/sign over the front door - light bulb has been replaced.	11-1-18
	4. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door so as to limit the spread of smoke and/or fire to the area			

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C 189	Continued From page 4 of origin. Findings on October 31, 2018: a. 200 Hall - Soiled Linen Room - a rubber device was wedged between the top hinge and the door frame so that the rated door could not close. The wedge has damaged the hinge as well and the door would not close. 5. Based on observation the facility's fire safety equipment is not maintained in operating condition. Items stored within 18" of the sprinkler heads may effect the head's ability to suppress a fire. Findings on October 31, 2018: a. 200 Hall-Soiled Linen - items were stored within 18" of the sprinkler head. 6. 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.	C 189	Device was removed immediately. Staff was educated on leaving device in doors to keep wedged open. Items were removed immediately and staff educated on the importance of keeping area clear 18" from sprinkler heads	11-1-18 11-1-18
	Findings on October 31, 2018: a. 300/400 Hall Laundry - there is a small, 1" unsealed conduit penetration in the ceiling behind the dryer unit. 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 doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on October 31, 2018:		1" unsealed penetration in the ceiling behind the dryer unit on the 300/400 laundry room was sealed.	10-31-18

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C 189	Continued From page 5 a. 200 Hall Community Bath - the strike plate is missing from the door. b. Room 410 - the door is dragging at the top of the frame making it difficult to close.	C 189	Strike plate on the 200 hall community bathroom was replaced. Room 410 door has been re-adjusted and corrected to properly shut.	11-7-18 10-31-18
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.	C 199		
	This Rule is not met as evidenced by: 1. Observations revealed that exhaust ventilation was not maintained in specified spaces. Findings on October 31, 2018: a. None of the resident room baths' ventilation was working at the time of survey. b. The vents in the Janitor's closet on the 100 Hall did not hold or pull a thin sheet of plastic applied to the vent. The room did have an odor of cleaning chemicals. c. The staff and guest bathrooms did not have a working ventilation system.		All Red and Progressive were called on 11-8-18. Progressive schedule for repair on 11-20-18 All vents in Janitor closet, staff bathrooms and Resident bathrooms were repaired.	11-20-18