

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL035029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 11/28/2018
NAME OF PROVIDER OR SUPPLIER PIONEER HEALTHCARE #2		STREET ADDRESS, CITY, STATE, ZIP CODE 113 JUSTICE STREET LOUISBURG, NC 27549		
(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 The Adult Care Licensure Section conducted an annual survey and follow-up survey on November 28, 2018.	C 000		
C 074	10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping And Furnishings (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure baseboards, handrails and hardwood floors in the hallways, living room and dining room were keep clean and in good repair. The findings are: Observation of the hallway on 11/28/18 at 11:00am revealed: -The hand railings on both side of the halls, which were attached to the walls, had chipped and scraped paint. -The baseboard had chipped paint on both sides of the hall. -The hand railings and baseboards had dust. Observation of the hardwood floors in the living room, dining room, and hallway on 11/28/18 at 11:45am revealed: -There were worn spots on the hardwood floors throughout the living room floor.	C 074		

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

TITLE

(X6) DATE

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C 074	Continued From page 1 -There were worn spots on the hardwood floors throughout the dining room floor. -There were worn spots on the hardwood floors throughout the hallway near the bedrooms and bathrooms. Interview with the medication aide (MA) on 11/28/18 at 11:15am revealed -She had noticed the handrails and baseboard had chipped paint. -She had not notified the Administrator that the handrails and baseboards had chipped paint. -She dusted the baseboards and handrails weekly. -She had not notified the Administrator that the hardwood floors had worn spots -She mopped the hardwood floors daily. Interview with the Administrator on 11/28/18 at 1:45pm revealed: -She was not aware that the baseboards and handrails had chipped paint. -She also did not know dust was on the baseboards and handrails. -The baseboard and handrails had been painted six month ago. -She did not know the hardwood floors had worn spots. -The floor was waxed in February 2018. -There was no system in place to assure needed repairs were reported to the Administrator.	C 074		
C 105	10A NCAC 13G .0317(d) Building Service Equipment 10A NCAC 13G .0317 Building Service Equipment (d) The hot water tank shall be of such size to provide an adequate supply of hot water to the	C 105		

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C 105	Continued From page 2 kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to maintain hot water temperatures between 100-116 degrees Fahrenheit (F) for 4 of 4 fixtures in the residents' bathrooms. The findings are: Observation on 11/28/18 at 10:30am revealed the hot water temperature at the sink in the common resident bathroom #1 was 124 degrees (F). Observation on 11/28/18 at 10:32am revealed the hot water temperature in the shower in the common resident bathroom #1 was 122 degrees (F). Observation on 11/28/18 at 10:34am revealed the hot water temperature at the sink in the common resident bathroom #2 was 124 degrees (F). Observation on 11/28/18 at 10:36am revealed the hot water temperature in the shower in the common resident bathroom #2 was 124 degrees (F). Interview with 3 of 3 residents on 11/28/18 at 4:00pm revealed they had not noticed any problems with the hot water temperatures in bathroom #1 and bathroom #2. Interview with the medication aide (MA) on 11/28/18 at 11:15am revealed: -She did not know the hot water temperature was	C 105		

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C 105	Continued From page 3 greater than 116 degrees (F) on 11/28/18. -She was aware the hot water temperature should be between 100-116 degrees (F). -She notified the Administrator on 11/28/18 at 11:37am that the hot water was greater than 116 degrees (F). -The Administrator told her to adjust the hot water temperatures and re-check the hot water temperatures in 30-45 minutes. -She checked the hot water temperature monthly. -She kept a record of the hot water temperature reading. -The last hot water temperature reading was 110 degrees (F) at the sink on 11/03/18 at 12:32 pm. Observation on 11/28/18 at 11:17am of bathroom #1's door revealed no sign had been posted Observation on 11/28/18 at 11:19am of bathroom #2's door revealed no sign had been posted Interview with the Administrator on 11/28/18 at 12:15pm revealed: -She was aware the hot water temperatures should be between 100-116 degrees (F). -The MA notified her on 11/28/18 at 11:37am that the hot water temperatures were greater than 116 degrees (F). -She instructed the MA to turned down the hot water temperatures and wait 30-45 minutes. -The MA checked the hot water temperature monthly, and she recorded the results on a flow sheet. Interview with the MA on 11/28/18 at 11:40am revealed she did not understand that the surveyor had requested signs be posted warning residents of the hot water temperatures in resident bathroom #1 and bathroom #2.	C 105		

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C 105	Continued From page 4 Second observation on 11/28/18 at 1:00pm revealed the hot water temperature at the sink in the common resident bathroom #1 was 122 degrees (F). Second observation on 11/28/18 at 1:02pm revealed the hot water temperature in the shower in the common resident bathroom #1 was 122 degrees (F). Second observation on 11/28/18 at 1:04pm revealed the hot water temperature at the sink in the common resident bathroom #2 was 122 degrees (F). Second observation on 11/28/18 at 1:06pm revealed the hot water temperature in the shower in the common resident bathroom #2 was 120 degrees (F). Observation on 11/28/18 at 1:00pm of bathroom #1's door revealed no sign had been posted Observation on 11/28/18 at 1:04pm of bathroom #2's door revealed no sign had been posted Interview with the MA on 11/28/18 at 1:10pm revealed she would adjust the hot water temperatures. Third observation on 11/28/18 at 4:50pm revealed the hot water temperature at the sink in the common resident bathroom #1 was 116 degrees (F). Third observation on 11/28/18 at 4:52pm revealed the hot water temperature in the shower in the common resident bathroom #1 was 116 degrees (F).	C 105			

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C 105	Continued From page 5 Third observation on 11/28/18 at 4:55pm revealed the hot water temperature at the sink in the common resident bathroom #2 was 116 degrees (F). Third observation on 11/28/18 at 4:57pm revealed the hot water temperature in the shower in the common resident bathroom #2 was 116 degrees (F). Interview with the Administrator on 11/28/18 at 5:00pm revealed: -The MA would check the hot water temperatures daily for five days. -She would notify a professional if the hot water temperatures were above 116 degrees (F).	C 105		
C 138	10A NCAC 13G .0404 Qualifications Of Activity Director 10A NCAC 13G .0404 Qualifications Of Activity Director There shall be a designated family care home activity director who meets the following qualifications: qualifications set forth in this Rule. (1) The activity director (employed on or after August 1, 1991) shall meet a minimum educational requirement by being at least a high school graduate or certified under the GED Program or by passing an alternative examination established by the Department of Health & Human Services This Rule is not met as evidenced by: Based on interviews and observations, the facility did not have a designated family care home activity director who had qualifications through a	C 138		

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C 138	Continued From page 6 formal training. The findings are: Based on record reviews, the facility had a current census of 6 residents. Observation of the front entrance hallway on 11/28/18 at 12:50pm revealed: -An activity calendar was posted on the wall over the sign out book. -There were 14 hours of activities documented per week. Interview with 3 of 3 residents on 11/28/18 revealed they had daily activities at the facility, Interview with the medication aide (MA) on 11/28/18 at 11:15am revealed: -She did daily activities at the facility. -She did not know if there was an Activity Director at the facility. Interview with the Administrator on 11/28/18 at 12:50 pm revealed: -She was responsible for doing the monthly activity calendar at the facility. -The facility did not have an Activity Director. -She did not know there had to be an Activity Director in a family care home. -Next week, she would look at hiring an Activity Director. -She would also look at findings a community college which offered courses for an Activity Director.	C 138		