

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL036034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 11/08/2018
NAME OF PROVIDER OR SUPPLIER SOMERSET COURT OF CHERRYVILLE		STREET ADDRESS, CITY, STATE, ZIP CODE 401 WEST ACADEMY STREET CHERRYVILLE, NC 28021		
(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 Report of a Construction Section Biennial Survey by Suzanna Fay conducted on November 8, 2018. Records indicate this facility was first licensed on October 27, 1997 for Sixty (60) 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, Institutional Occupancy Group I. Deficiencies were cited that require a Plan of Correction.	C 000	Responses to the cited deficiencies do not constitute an admission or agreement by the facility of truth or the facts alleged or conclusion set forth in the statement of deficiencies or corrective action, report, the Plan of Correction prepared solely as a matter of compliance with State Laws.	
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 walls are not kept in good repair. Findings on November 8, 2018: a. Corridor outside Room 223 - a triangle section of the windowsill has cracked and is close to	C 164	It is policy of Somerset Court of Cherryville to assure the rights of all residents guaranteed under 10A NCAC 13F .0306 (a)(1)(2)(3)(e) Physical Plant Housekeeping and Furnishings 1.(a) The windowsill in the outside Corridor near Room 223 has been repaired	12-19-18

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

TITLE

(X8) DATE

Suzanna Fay

Executive Director

12/28/18

STATE FORM

5899

3UJD21

If continuation sheet 1 of 5

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JAN 02 2019

CONSTRUCTION SECTION

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C 164	Continued From page 1 breaking off.	C 164		
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 November 8, 2018: a. Room 132 Bath - the door hardware is installed backwards so that a resident could get locked in the bathroom.	C 166	It is policy of Somerset Court of Cherryville to assure the rights of all residents guaranteed under 10A NCAC 13F .0306 (a)(5)(e) Physical Plant Housekeeping and Furnishings 1.(a) The bathroom hardware in Room 132 has been properly installed	11-14-18
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:	C 189		

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C 189	Continued From page 3 Findings on November 8, 2018: a. Activity Room Closet - items were stacked to the ceiling. b. Main Electrical Room - file boxes and envelopes are stacked to the ceiling in the storage area. c. Pantry - combustible items are stored to the ceiling. 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. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on November 8, 2018: a. Main Electrical Room - the 3/4 hour door between the rooms was held open using a wedged device. b. Laundry - the 3/4 hour door to laundry is being held open with a wedged device. 5. Observations revealed that the fire safety equipment is not maintained in a safe and operating condition. Findings on November 8, 2018: a. Room 219 - the smoke detector is not secure to the ceiling. b. Dining Room - the magnetic hold open device is not secure to the wall on the left door.	C 189	3.(a) Executive Director instructed the Life Enrichment Coordinator to clean out the Activity Room Closet and remove any items stacked to the ceiling. The Executive Director will monitor. 3.(b) Executive Director instructed the Housekeeping Staff to remove stacked envelopes and file boxes stacked to the ceiling. Eecutive Director will monitor. 3.(c) Executive Director instructed the Dietary Manager to remove any combustible items that were stored to the ceiling. Executive Director will monitor this area. 4.(a) Executive Director removed wedges propping the 3/4 hour door between the rooms in Main Electrical Room. 4.(b) Executive Director removed the wedge from the 3/4 hour door to the Laundry. The Executive Director will monitor to ensure the door stays closed. 5.(a) The smoke detector in Room 219 has been replaced. 5.(b) The magnetic hold open device for the Dining Room left door has been repaired.	11-30-18 11-30-18 11-30-18 11-08-18 11-08-18 11-12-18 11-14-18
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 199		

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C 199	Continued From page 4 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. This Rule is not met as evidenced by: 1. Observations revealed that the facility did not maintain exhaust ventilation in required areas. Findings on November 8, 2018: a. Janitor Closet - the exhaust fan is not working and there is a strong chemical odor in the room.	C 199	It is the policy of Somerset Court of Cherryville to assure the rights of all residents guaranteed under 10A NCAC 13F .0311 (g)(1)(2)(3)(4)(5)(k) Physical Plant Other Requirements 1.(a) Executive Director has entered in a work with Facility 360 to replace the exhaust fan in Janitor Closet. The exhaust fan has been ordered and waiting on delivery. Estimated date of completion 1-23-18.	