

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL066011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 01/09/2019
NAME OF PROVIDER OR SUPPLIER RICH SQUARE MANOR		STREET ADDRESS, CITY, STATE, ZIP CODE 400 N MAIN STREET RICH SQUARE, NC 27869		
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C 000	Initial Comments Report of a Construction Section Biennial Survey conducted by Suzanna Fay on January 9, 2019.	C 000		
C 101	Records indicate this facility was first licensed or submitted for licensure on January 31, 1997 as a Home for the Aged. The facility is currently licensed as a 32 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1997 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. 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	Responses to the cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusions set forth in the statement of deficiencies: The Plan of Correction is prepared solely as a matter of compliance with State law. It is the policy of the Rich Square Manor to maintain the physical plant and all requirements therein, Section .0300-Physical Plant 10A NCAC 13F .0301 Application of Physical Plant Requirements.	

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

Deanna Lanier

TITLE

Executive Director

(X6) DATE

2/7/2019

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Observations revealed that the facility's magnetic locking system is not installed in conformance with the building codes in effect at the time of construction, change in service, addition, renovation or alteration. Findings on January 9, 2019: a. The override switches for the magnetic locking system at all of the exit doors is a push button that automatically relocks the doors after 30 seconds. The building code requires the override switches to be on/off type switches. 2. Observations revealed that the facility conducted renovations of the shared toilet rooms which do not meet all applicable volumes of the North Carolina State Building Code. Findings on January 9, 2019: a. Direct observation revealed shower heads were installed over the toilets in each of the shared toilet rooms. FRP panels were placed over the sheetrock behind the toilet. [Note: At the time of survey, all of these shower heads were turned off at valves located behind the plastic plumbing access panels.] The wall areas do not meet the requirement for non-absorbent waterproof materials. The walls are regular sheetrock and the doors are untreated wood. [2012 NC Plumbing Code 417.4.1] The bathrooms have floor drains. No evidence that the drain meets requirements for shower drain. It was unknown if a trap primer was provided or if the drain meets an approved exception. [2012 NC Plumbing Code 417.3]	C 101	1. a. Chris Register with First Fire was contacted on 2/4/2019 in reference to the magnetic locking system. Estimated Completion date: 3/15/2019 2. a. Corporate is currently reviewing the what direction to take on the install shower heads. Estimated completion Date: 3/15/2019	

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C 101	Continued From page 2 There is no evidence that the bathroom floor (shower floor) were provided with a liner and made water tight, the liner turned up not less than 2 inches on all sides and sloped toward the drain. The floor is flat and the thresholds at the doors provide only 1/4 inch or less curb to keep water in the room. [2012 NC Plumbing Code 417.5.2] [See Cross Reference at Tag C 116]	C 101		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not maintain current building sanitation inspection reports. Findings on January 9, 2019: a. The most recent building sanitation inspection was conducted on June 26, 2017. Interview with Staff revealed that the county has not had a inspector for some time. b. The Fire Sprinkler Inspection was conducted on June 28, 2018. and listed several items which have not been addressed as either corrected deficiencies or recommendations (that are not required).	C 111	1.a. There is currently no sanitation inspector for Northampton County. Will contact County. 1. b. We have contracted First Fire Prevention to correct deficiencies . Estimated completion date: 3/15/2019	

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C 116	Continued From page 3	C 116		
C 116	Plans Submittals and Approvals	C 116		
	SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure. Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division. (d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained. (e) Completed construction or remodeling shall conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder.			

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C 116	Continued From page 4 (f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion. This Rule is not met as evidenced by: 1. Observations revealed remodeling occurred and construction documents were not submitted, approval was not obtained from the Division and all licensing requirements were not maintained. Findings on January 9, 2019:	C 116			
C 153	a. Shower heads were installed in the wall over the toilets in most of the resident room's 1/2 baths. There is no evidence that copies of the plans and specifications were submitted to DHSR/Construction Section for review and approval. [See Cross Reference at Tag C 101] Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and	C 153	Corporate is reviewing the policy and will comply with said regulations.	1/10/2019	
	This Rule is not met as evidenced by: 1. Observations revealed that all exit door locks				

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C 164	Continued From page 6 tiles are stained and scratched along the edges. Staff stated that the facility was scheduled to be renovated. b. Shared Bath for Rooms 7/8 - the vinyl tiles around the toilet are discolored and are separating at the seams leaving large, irregular gaps between the tiles. There is a strong, unpleasant odor in the room. 3. Observations revealed that the walls and furnishing are are not maintained in good repair. Findings on January 9, 2019: a. Shared Bath for Rooms 7/8 - the wall to the right of the toilet is stained and the finish is flaking off of the wall. b. Nurses' Station - the laminate is broken and sections are missing or have delaminated. The paint is chipped and the cabinets are worn and stained.	C 164	2. b. Tiles for bathroom tile in rooms 7/8 bathroom floor has been ordered. Estimated Completion Date: 2/15/2019 3.a. FRP panel was installed to assist with upkeep and visual aspect of bathroom. 3.b. Will recover nurses station in formica and paint drawer faces until repair date established. Estimated completion Date: 3/1/2019	2/1/2019 3/1/2019
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.	C 166		
	Findings on January 9, 2019:			

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C 166	Continued From page 7 a. The floor tiles in front of the dining room doors are broken and loose creating a tripping hazard.	C 166	1.a. Replaced red broken tile leading in to dining room. White had to be reordered. Estimated completion: 2/15/2019	2/1/2019
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 electrical equipment was not maintained in a safe and operating condition. Findings on January 9, 2019: a. The sounding device on the nurse call system did not operate. The visual devices did operate. 2. Observations revealed that the life safety equipment was not maintained in a safe and operating condition. Findings on January 9, 2019: a. Dining - the magnetic lock over the exterior door to the courtyard is falling off of the door header.	C 189	1.a. Nurses call system has been worked on. Final repair by First Fire Estimated completion date: 2/8/2019 2.a. The magnetic lock was repaired and remounted with new hardware.	1/9/2019
C 199	Exhaust Ventilation	C 199		
	SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER			

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C 199	Continued From page 8 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 January 9, 2019: a. Women's Restroom off of Living area - the exhaust fan was not working. b. Men's Restroom off of Living area - the exhaust fan was not working. c. Room 5 Bath - the exhaust fan is not working. d. Soiled Linen - the exhaust fan is not working.	C 199	1.a. Exhaust fan is on order.Estimated completion date 3/1/2019 1.b. Exhaust fan is mens bathroom is on order. Estimated completion: 3/1/2019 1.c. Exhaust fan for Room 5 bath is on order.Exhaust fan for soiled linen room is on order. Estimated completion: 3/1/2019		