Memory Care of the Triad
413 North Main Street
Kernersville, NC 27284
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TO: DHSR Construction Section FROM: Candice McLaurin

RE: _____ DATE: 3/4/19

FAX# 919-733-6592 PHONE# _____

TOTAL PAGES, INCLUDING COVER _____

COMMENTS:

PRINTED: 02/12/2019
FORM APPROVED

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
	HAL034068	A. BUILDING: 01 B. WING _____	C 01/25/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MEMORY CARE OF THE TRIAD	413 NORTH MAIN STREET KERNERSVILLE, NC 27284

(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 Complaint Survey by Ed Miller, conducted on January 25, 2019. The Complaint alleged that the facility has no heat in the facility for two weeks and there are roaches in the kitchen. This facility was first licensed as a Home for the Aged serving 59 residents on 08/01/1986. However, a tax document provided by the staff indicates the facility was built and operating in 1965. The facility is currently licensed for 42 Special Care residents. Based on this information, this facility is required to meet the 2005 Rules for the Licensing of Adult Care Homes, and, the 1958 NC State Building Code, Institutional Unrestrained. The roach Complaint was substantiated 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	C 101		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Candice McFarin Executive Director 2/27/19

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C 101	Continued From page 1 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 and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all of the required components or procedures to properly operated doors equipped with Special Locking Arrangements. This could affect all occupants who would need to evacuate through the door(s). Findings on January 25, 2019: a. Entire Building - the exit doors are part of a "Special Locking" Arrangement and the local emergency override switches require metal keys to egress the facility. Interview with staff in the area revealed 1 out of 3 did not have their key. b. Entire Building- the local emergency override switch for the "Special Locking" Arrangement doors and gates requires a key to operate. These keys cannot be removed from the switch without reenergizing the lock. This is not in accordance with the NC State Building Code's requirement that the emergency override switches to be on/off switches.	C 101	All staff has keys on a wrist band on their arms that they carry around. After the shift ends they will pass along to the on-coming next shift. Supervisors will make sure this is done prior to the start of the shift. 1/25/19 The on/off switch to disable the mag locks is in place and was put in place when the system was installed originally.	
C 110	Construction-Meet Sanitary Requirements SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION (e) The sanitation, water supply, sewage disposal and dietary facilities shall comply with the rules of the	C 110		

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C 110	Continued From page 2 North Carolina Division of Environmental Health, which are incorporated by reference, including all subsequent amendments. The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", 15A NCAC 18A .1300 are available for inspection at the Department of Environment and Natural Resources, Division of Environmental Health, 2728 Capital Boulevard, Raleigh, North Carolina. Copies may be obtained from Environmental Health Services Section, 1632 Mail Service Center, Raleigh, North Carolina 27699-1632 at no cost. This Rule is not met as evidenced by: 1. Based on observation, review of records, and interview with Administrator the facility failed to provide effective control of roaches in the kitchen. Findings on January 25, 2019: a. Kitchen - several dead roaches were observed around the perimeter of the room. b. Pantry - serval dead roaches were observed around the perimeter of the room. c. Pantry - one live roach was observed on the floor. d. Kitchen and Pantry - the perimeter floor need sweeping. e. Review of document revealed that roaches were still observed in the Kitchen by the pest management company (PMC).	C 110	We have a contract with a pest control company that comes out monthly and on an as needed basis. Documents were give during the visit on 1/25/19. The Kitchen staff will have a cleaning schedule to sweep and mop Kitchen after each shift. This will help capture the roaches when Kitchen has been treated. 2/27/19	

Candice McLaurin Executive Director 2/27/19