Colonial Care

340 Snowhill Drive
Mount Airy, NC 27030
(336) 786-2195 Telephone
(336) 786-8891 Fax

Dear Mr. Miller:

I, Mark Payne, Administrator at Colonial Care Adult Care home would like to request a waiver for Tag # C 128.

Rule States: (1) Minimum bathroom and toilet facilities shall include a toilet and a hand lavatory for each 5 residents and a tub or shower for each 10 residents or portion thereof;

The tub that was removed since the last survey will be replaced immediately with a stand up shower for resident availability. This puts the facility at 5 total tub/showers.

I, am requesting a waiver for the 6th tub/shower. Colonial Care was built in September of 1966, since the opening of Colonial Care the facility has only had a total of 5 tub/showers. Colonial Care has provided a safe environment for all these years, for each and every one of its residents. If it is possible we would like to be granted a waiver for this rule. We will continue to provide a high standard and safe environment for each and all residents. Thank you for your consideration. Please do not hesitate to contact me at 336-786-2133 for any further questions.

Sincerely,

Mark Payne

Mark Payne, Administrator

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
	HAL086002	A. BUILDING: 01 B. WING	04/18/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COLONIAL LONG TERM CARE FACILITY	340 SNOWHILL DRIVE MOUNT AIRY, NC 27030

(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 Ed Miller, conducted on April 18, 2019. Records indicate this facility was first licensed in 1966. The facility is currently licensed for fifty-four Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and the applicable portions of the 1958 NC State Building Code.. Deficiencies were cited that require a Plan of Correction.	C 000		
C 128	Bathrooms-Minimum Facilities SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (1) Minimum bathroom and toilet facilities shall include a toilet and a hand lavatory for each 5 residents and a tub or shower for each 10 residents or portion thereof; This Rule is not met as evidenced by: 1. Based on observation and interview with Manager and Administrator, the facility failed to maintain the minimum plumbing fixture to resident ratio required by the Rule. Findings on April 18, 2019: a. Entire Building - there are 3 showers and 1 tub available to the Residents. A tub was remove since the last survey. The facility is require to have 6 tubs and/or showers available for residents.	C 128	The facility will immediately have the tub that was removed from last survey put back in place and maintained in a clean safe condition. The facility has requested a waiver for the 6th tub/shower. The Administrator or his designee will do monthly checks thereafter to ensure all tub/showers are maintained and are in a good working order at all times. The above findings will be fixed and corrected by 5/25/19.	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Mark Payne | TITLE | (X6) DATE: 5/9/19

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C 150	Continued From page 1	C 150		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on April 18, 2019: a. Exit near Bedroom 24 - there two wheel chair and a bike chained to the handrail, obstructing the required six feet width of the corridor..	C 150	The facility removed the two wheel chairs from the hallway. The facility also removed the chained bike from the hallway. The Administrator or his designee will do a facility sweep to ensure all corridors are free of equipment and other obstructions. The Administrator or his designee will do weekly checks for 4 weeks and then monthly thereafter to ensure all corridors are free from obstructions. Staff education will be done on corridors being free of all equipment and other obstructions. The above findings will be fixed and back in compliance, and education completed by 5/25/19.	
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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on April 18, 2019: a. Bedroom 6 - the ventilation system with have	C 164		

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C 164	Continued From page 2 an excessive accumulation of dust/lint. b. Bedroom 9 - the ventilation system with have an excessive accumulation of dust/lint. 2. Based on observation, the building walls are not kept clean and in good repair. Findings on April 18, 2019: a. File Room on Laundry Porch.- water is infiltrating this space, wetting the gypsum walls and the room's contents. Some of the gypsum is missing and mold is present. 3. Based on observation, the building ceilings are not kept clean and in good repair. Findings on April 18, 2019: a. Bedroom 3 - there is a leak in the closet and the ceiling is stained and mold present. b. Bedroom 24 - there is a leak in the closet and the ceiling is stained	C 164	The facility immediately had the maintenance man or his designee clean the ventilation system in bedrooms 6 and 9. to get rid of excess dust/lint. The facility will be removing the entire file room on laundry porch. The maintenance man or his designee will fix the leaks in bedrooms 3 and 24 and remove the mold present in bedroom 3 closet. The maintenance man or his designee will do a facility sweep to ensure all housekeeping and furnishings are in good repair. The Administrator or his designee will do weekly checks for 4 weeks then monthly thereafter to ensure mechanical systems, building walls, and building ceilings are kept clean and in good repair. The above findings will be fixed and in safe condition by 5/25/19.	
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. Based on Observation, the Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on April 18, 2019:	C 166		

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C 166	Continued From page 3 a. Storage Building - 4 portable medical oxygen cylinders are standing up on the floor not physically secured in racks, stands or chained to the structure. b. Storage Building - 7 portable medical oxygen cylinders are standing up on the floor in an unapproved plastic crate not physically secured in racks, stands or chained to the structure. 2. Based on Observation, the Building was not maintained free of hazards, because general maintenance was not being done or had not been completed. This could affect all residents, staff, and visitors if items are broken or partially removed and left where they could injure all. Findings on April 18, 2019: a. Bedroom 24 - the kick plate on the door is not secured. The exposes residents to rough and sharp edges along with the screws..	C 166	The facility immediately removed the 4 portable medical oxygen cylinders. The facility will send back the 7 oxygen containers to the company, and only use the approved oxygen container holder already on site at facility. The maintenance man or his designee will replace the kick plate on bedroom 24 door. The maintenance man or his designee will do a facility sweep to ensure there are no other hazards and is maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards. The Administrator or his designee will do monthly checks to ensure the facility is maintained free of hazards. The above findings will be fixed and back in safe conditions by 5/25/19.	
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas, with the required individual towels and/or towel bars for each resident. Findings on April 18, 2019:	C 175	The facility will add the required Individual towel bars for the entire building, in bedrooms or adjoining bathrooms. The Administrator or his designee will do monthly checks to ensure all bedrooms and adjoining bathrooms have the required individual towel bars. The above findings will be fixed and corrected by 5/25/19.	

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C 175	Continued From page 4 a. Entire Building - in the Bedrooms or adjoining Bathrooms, there is insufficient individual towel bars for the number of Residents.	C 175	The facility will be removing the entire file room on laundry porch. The facility will fix the exit sign to illuminate on main corridor entrance into living when on backup power. All observations found that could expose all to fire/smoke will be fixed and maintained by an outside contractor. All corridor doors that was found not to automatically latch into their frame will be fixed and maintained by facility maintenance man or his designee. All observations where he facility failed to maintain the electrical system, an electrical contractor will be used to repair all electrical systems that were found out of compliance. The maintenance man or his designee will do a facility sweep to ensure all fire safety, electrical, mechanical, and plumbing equipment is in a safe and good operating condition. The facility Administrator will do weekly checks for 4 weeks and then monthly thereafter to ensure all building equipment is maintained safe and in good operating condition. The above findings will be fixed and back in a safe condition by 5/25/19.	
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. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on April 18, 2019: a. File Room on Laundry Porch - this space, which was created some time after the facility was originally constructed, does not have automatic fire detection. 2. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on April 18, 2019: a. Main Corridor Entrance into Living - the exit sign did not illuminate on backup power when tested.	C 189		

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C 189	Continued From page 5 3. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on April 18, 2019: a. Most Bedroom Closets - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. b. Many Bedroom Closets - there is a cable with its firestopped sealant pulled out of the penetration of the fire-resistance-rated ceiling, leaving an unprotected opening. c. Shared Toilet Room between Bedrooms 6 & 8 - - there is a gap around a conduit not firestopped as it penetrates the fire-resistance-rated ceiling assembly. d. Living Room - there are two pipes with their firestopped sealant pulled out of the penetration of the fire-resistance-rated ceiling, leaving an unprotected opening. e. Main Corridor Entrance into Living - there is a gap around the base of the exit sign not firestopped as it penetrates the fire-resistance-rated ceiling assembly. f. Dining Room - there is a pipe with its firestopped sealant pulled out of the penetration of the fire-resistance-rated ceiling, leaving an unprotected opening. g. Dining Room - there is a cable not firestopped as it penetrates the fire-resistance-rated corridor wall assembly. h. Laundry - there are three holes not firestopped as they penetrate the fire-resistance-rated ceiling assembly. i. Laundry Porch - there is a 6 x 12 inch hole not firestopped as they penetrate the fire-resistance-rated ceiling assembly and roof. j. Bedroom 12 - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling	C 189		

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C 189	Continued From page 6 assembly. k. Bedroom 11 Closet - there is a gap around the base of the heat detector not firestopped as it penetrates the fire-resistance-rated ceiling assembly. l. Lower Lobby Closet - there are two pipes not firestopped as they penetrate the fire-resistance-rated ceiling assembly. m. Bedroom 18 - there are two pipes and a cable not firestopped as they penetrate the fire-resistance-rated ceiling assembly. n. Bedroom 20 - there are two pipes and a cable not firestopped as they penetrate the fire-resistance-rated ceiling assembly. o. Attic Firewall - there are three cables not firestopped as they penetrate the firewall. p. Attic Draft Stops - both draft stop doors were left open 4. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke. Corridor door must positively/automatically latch into their frame under normal closing force. This could affect all residents, staff, and visitors if the doors did not latch to contain smoke/fire in the room of origin. Findings on April 18, 2019: a. Bedroom 5 - the corridor door's latch bolt is install backwards and the door cannot closed and latch unless the latch bolt is retracted with the handles. b. Bedroom 9 - the corridor door is missing its latch bolt, therefore the door cannot latch to its frame. c. Bedroom 20 - the corridor door is missing its latch bolt, therefore the door cannot latch to its frame. d. Bedroom 15 - the corridor door has a hole through the door.	C 189		

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C 189	Continued From page 7 e. Bedroom 19 - the corridor door has a hole through the door. 5. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on April 18, 2019: a. Bistro - the corridor door has a coat hanging off the top of the leaf, preventing the door from closing. This prevents the rapid closing of the door to latch with a light push or pull of the door. 6. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on April 18, 2019: a. Laundry - the left electrical panel has three open slots were breakers had been removed and there were on two blanks filling the slots . This allows access to energized components that are not guarded against accidental contact. b. Boiler Room - there is an electrical power receptacle with an unsecured cover plate. c. Boiler Room - there is an electrical device with an unsecured cover plate. d. Pantry - the ceiling mounted electrical power receptacle has a broken cover plate. e. Bedroom 6 - two power taps are daisy chained into an another power tap. Power taps must connect directly to permanently installed branch circuit electrical power receptacles. f. Bedroom 6 - the first power tap in the daisy chain in hanging from its electrical power receptacle. g. Bedroom 9 - an extension cord is plugged into a power tap. Extension cords cannot substitute for permanent wiring. h. Bedroom 9 - the power tap is hanging from its electrical power receptacle.	C 189		

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C 189	Continued From page 8 i. Bedroom 21 - a power tap (power strip) is plugged into an extension cord. Power taps must connect directly to permanently installed branch circuit electrical power receptacles. j. Shower Room near Bedroom 21 - the is an old light fixture missing an end cap. This allows access to energized components that are not guarded against accidental contact.	C 189		
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. This Rule is not met as evidenced by: 1. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on April 18, 2019: a. Shared Toilet Room between Bedrooms 2 & 4 - the required exhaust ventilation system did not work, and there is odor.	C 199	The facility with immediately fix the exhaust fans in between rooms 2 and 4, 5 and 7, also bathroom near bedroom 8 and bathroom near bedroom 10. The facility maintenance man or his designee will do a facility check on all exhaust fans to ensure there is no other exhaust fans not working properly. The Administrator or his designee will do monthly checks to ensure all exhaust ventilation stays in proper working condition. The above findings will be fixed and back in a safe condition 5/25/19.	

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C 199	Continued From page 9 b. Shared Toilet Room between Bedrooms 5 & 7 - the required exhaust ventilation system did not work, and there is odor. c. Bathroom near Bedrooms 8 - the required exhaust ventilation system did not work, and there is odor. d. Bedrooms 10 Bathroom - the required exhaust ventilation system did not work, and there is odor.	C 199		