

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL051041	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/05/2019
NAME OF PROVIDER OR SUPPLIER CLAYTON HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 145 DAIRY ROAD CLAYTON, NC 27520		
(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 Biennial Follow Up Construction Survey by Suzanna Fay conducted on June 5, 2019. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	{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 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. Observations revealed that the facility does not meet the Building Code requirements for the installed magnetic locking system in effect at the time of construction or alteration. Findings on June 5, 2019: a. There is not a wiring diagram and a components map located at the fire alarm panel.	{C 101}		

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

TITLE

(X6) DATE

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{C 160}	Continued From page 1	{C 160}		
{C 160}	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. The exterior damages have not been repaired and the conditions are deteriorating. Additional deficiencies are cited at each location. Findings on June 5, 2019: a. The fascia trim is rotting outside of the dining room at the 100 Hall. Some of the soffit vents are missing The paint is flaking and peeling at the fascia trim around the kitchen and dining rooms. Contractors are on site making repairs. Repairs began 06/05/2019. b. There is a small section of rotted fascia trim outside of the old building at the staff exit (end of 100 Hall.) The siding is soft and rotting along the left side of the addition. There is a 3" diameter hole in the exterior siding along the left side of the addition. Contractors are on site making repairs. Repairs began 06/05/2019. c. 200 Hall Exit - the exterior soffit and trim are heavily damaged from rot along the bottom right of the gable roof and on the bottom right corner of the porch roof. The paint along the fascia is flaking and peeling. The porch ceiling is unfinished plywood. The soffit at the right corner of the front of the building is damaged and falling	{C 160}		

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{C 160}	Continued From page 2 off leaving holes in the soffit. Contractors are on site making repairs. Repairs began 06/05/2019. g. 300 Hall back exit - the fascia trim and soffit at the end of the porch are heavily damaged from decay. Contractors are on site making repairs. Repairs began 06/05/2019. f. 300 Hall back exit-the concrete walk from the ramp to the patio is cracked, spalling and uneven. The walk at the 200 Hall exit is also spalling and broken creating an unsafe walk. Contractors are on site making repairs. Repairs began 06/05/2019. g. New Deficiency from 03/29/2019: An old pavilion and fountain were removed outside of the fenced enclosure. The debris was thrown into the fountain leaving an unsafe pile of rubble. Contractors are on site making repairs. Repairs began 06/05/2019.	{C 160}		
{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: 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops.	{C 189}		

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{C 189}	Continued From page 3 Findings on June 5, 2019: a. Room 205 - there is a gap around the door between the door and the door frame stops. Interview with staff revealed that they are ordering another door.	{C 189}		