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
	FCL041067	A. BUILDING: **01** B. WING _____	**07/11/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PEAR MANOR	**2521 PEAR STREET GREENSBORO, NC 27401**

(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 by David Hickman DHSR Construction Section conducted a Biennial Survey on July 11, 2019 from 12:30 PM to 2:25 PM at the above referenced facility. DHSR records indicate the home was first licensed on September 15, 2009 as a Family Care Home for six ambulatory Residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency.) Based on this information we are requiring the home to maintain compliance with the following; :the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the applicable portions of the 2006 North Carolina State Building Code - Section 421.2 - Residential Care Homes. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the alarm was not being used to iniate the fire drills. This is not compliant with the rule. Take the necessary steps to use the alarm for all fire drills.	C 174	C 174 1. To correct this action, effective July 25, 2019, The facility will take necessary steps to use the alarm during fire drills. Fire drills are done monthly. However, some drills were verbal alarms in the past. Please see the end of this report for further details.	07-25-19

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE Administrator | (X6) DATE 08-14-19

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C 174	Continued From page 1 2. At the time of the survey it was observed that the time noted on the fire drills for evacuation was including the time for returning back into the home. This is not compliant with the rule. Take the necessary steps to only record the time for evacuation of the home. 3. At the time of the survey it was observed that the fire extinguishers were not being monitored on a monthly basis by the staff. This is not compliant with the rule. Take the necessary steps to have the staff check the extinguishers monthly and initial the tags. 4. At the time of the survey it was observed that there were several areas of the floors around the air conditioner registers that were deteriorated and the registers covers did not fir properly or were falling in. This is not compliant with the rule. Take the necessary steps to repair all of these areas. 5. At the time of the survey it was observed that the door to the bedroom at the front foyer would not latch properly. This is not compliant with the rule. Take the necessary steps to repair the door so it latches. 6. At the time of the survey it was observed that the floor transition at the threshold to the bedroom at the front foyer was missing causing a trip hazard. This is not compliant with the rule. Take the necessary steps to replace the transition strip. 7. At the time of the survey it was observed that the smoke detector in the bedroom at the front foyer had missing batteries. This is not compliant with the rule. Take the necessary steps to replace	C 174	C 174 2. To correct this action, effective July 25, 2019, the facility will not include the return time for evacuations. Please see the end of this report for further details. 3. To correct this action, effective July 25, 2019, the facility staff will document when the fire extinguishers have been monitored monthly. Please see the end of this report for further details. 4. To correct this action, the several areas around the air conditioner registers were either repaired or replaced where needed. Repairs were made on August 3, 2019. Please see the end of this report for further details. 5. To correct this action, the door to the bedroom was repaired to latch properly on August 3, 2019. Please see the end of this report for further details. 6. To correct this action, the floor transition at the threshold to the bedroom at the front foyer has been installed. The installation was done on August 3, 2019. Please see the end of this report for further details. 7. To correct this action, a new smoke detector was installed in the bedroom at the front foyer. The installation was made on August 14, 2019. Please see the end of this report for further details.	07-25-19 07-25-19 08-03-19 08-03-19 08-03-19 08-14-19

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C 174	Continued From page 2 the battery. 8. At the time of the survey it was observed that the light in the bedroom off of the living room was not working. This is not compliant with the rule. Take the necessary steps to repair the light.	C 174	8. To correct this action, the light in the bedroom off the living room is working. The repair was made on August 3, 2019. Please see the end of this report for further details.	08-03-19
	9. At the time of the survey it was observed that the bed in the bedroom off of the living room was not in a postion so the resident could reach the call system button. This is not compliant with the rule. Take the necessary steps to correct this deficiency.		9. To correct this action, the bed in the bedroom off the living room was moved and can now reach the call system button. The bed was moved on August 13, 2019. Please see the end of this report for further details	08-13-19
	10. At the time of the survey it was observed that the toilet in bathroom 3 was loose at it's base. This is not compliant with the rule. Take the necessary steps to scure the toilet.		10. To correct this action, the toilet in bathroom 3 was tightened at the base and is no longer loose. The toilet was secured on August 3, 2019. Please see the end of this report for further details	08-03-19
	11. At the time of the survey it was observed that the drain in the sink of bathroom 3 was draining very slow. This s not compliant with the rule. Take the necessary steps to have the drain unclogged.		11. To correct this action, the drain in the sink of bathroom 3 has been repaired and no longer drains slow. The repair was made on August 3, 2019. Please see the end of this report for further details	08-03-19
	12. At the time of the survey it was observed that two of the lights in the kitchen were missing their covers. This is not compliant with the rule. Take the necessary steps to replace the light covers.		12. To correct this action, the two lights in the kitchen have been replaced with new lighting. The installation took place on August 3, 2019. Please see the end of this report for further details	08-03-19
	13. At the time of the survey it was observed that the range vent pipe was not sealed where it passed through the ceiling. This is not compliant with the rule. Take the necessary steps to seal the pipe at the ceiling.		13. To correct this action, the range vent pipe was properly sealed at the ceiling on August 03, 2019. Please see the end of this report for further details	08-03-19
	14. At the time of the survey it was observed that the receptacle next to the back door was missing it's cover plate. This is not compliant with the rule. Take the necessary steps to replace the cover plate.		14. To correct this action, a new cover plate was installed over the receptacle at the back door on August 14, 2019. Please see the end of this report for further details	08-14-19

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C 174	Continued From page 3 15. At the time of the survey it was observed that the slidng glass door used for the rear egress was not a single hand motion lock. This is not compliant with the rule. Take the necessary steps to have a single motion lock installe on the door.	C 174	15. To correct this action, a new single hand motion lock handle was placed on the back door on August 14, 2019. Please see the end of this report for further details	08-14-19
	16. At the time of the survey it was observed that there was wood panelling in the dining room and kitchen and could not be verified of treatment for a class C finish. This is not compliant with the rule. Take the necessary steps to treat the panelling with the rpoper fire retardent material or provide documentation of any previous treatment.		16. The wood panelling has been previously verified and is already the proper fire retardant paint. Please see the end of this report for further details	
	17. At the time of the survey it was observed that there was a crack in the hallway floor at the bathroom door. This is not compliant with the rule. Take the necessary steps to repair the floor.		17. To correct this action, the crack on the hallway floor at the back door was repaired on August 3, 2019. Please see the end of this report for further details	08-03-19
	18. At the time of the survey it was observed that there was a hole in the wall behind the washing machine. This is not compliant with the rule. Take the necessary steps to repair the hole.		18. To correct this action, the hole behind the washer was repaired on August 3, 2019. Please see the end of this report for further details	08-03-19
	19. At the time of the survey it was observed that there were missing light bulbs in bathroom 1. This is not compliant with the rule. Take the necessary steps to repalce the missing bulbs.		19. To correct this action, new light bulbs were installed in bathroom 1 on August 13, 2019. Please see the end of this report for further details	08-13-19
	20. At the time of the survey it was observed that the grab bar for the shower in bathroom 1 was mising. This is not compliant with the rule. Take the necessary steps to install a proper grab bar.		20. To correct this action, new grab bars were installed in bathrom 1 on August 3, 2019. Please see the end of this report for further details	08-03-19
	21. At the time of the survey it was observed that the exhaust fan vents in bathroom 1 and the staff bathroom were dirty. This is not compliant with the rule. Take the necessary steps to clean the exhaust fans.		21. to correct this action, the exhaust fans in bathroom 1 were cleaned on August 3, 2019. Please see the end of this report for further details	08-03-19

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	22. At the time of the survey it was observed that the receptacle cover in the staff bathroom was cracked. This is not compliant with the rule. Take the necessary steps to replace the cracke cover.		22. To correct this action, the receptacle in the staff bedroom was replaced with a new cover on August 14, 2019. Please see the end of this report for further details	08-14-19
	23. At the time of the survey it was observed that there was a multiplug adapter in the staff bedroom. This is not compliant with the rule. Take the necessary steps to remove the multiplug adapter.		23. To correct this action, the multi plug adapter in the staff bedroom was removed on August 14, 2019. Please see the end of this report for further details	08-14-19
	24. At the time of the survey it was observed that there was not a handrail on the house side of the front steps. This is not compliant with the rule. Take the necessary steps to add a handrail at the front steps.		24.To correct this action, a new handrail was installed on the side of the house on August 3, 2019. Please see the end of this report for further details	08-03-19
	25. At the time of the survey it was observed that there were missing light bulbs at the front porch light and the flood lights at the front right. This is not compliant with the rule. Take the necessary steps to replace the missing bulbs.		25. To correct this action, the light bulbs were replaced on the front porch and a new flood light was installed on the front right on August 14, 2019. Please see the end of this report for further details	08-14-19
	26. At the time of the survey it was observed that the bottom portion of the front door was peeling in two. This is not compliant with the rule. Take the necessary steps to repair or replace the front door.		26. To correct this action, the bottom portion of the front door was repaired on August 3, 2019. Please see the end of this report for further details	08-03-19
	27. At the time of the survey it was observed that metal facia board was bent and coming apart in several locations. This is not compliant with the rule. Take the necessay steps to repair as necessary.		27.To correct this action, the metal facia board was repaired on August 3, 2019. Please see the end of this report for further details	08-03-19
	28. At the time of the survey it was observed that the slope of the ramp in the back was too steep. This is not compliant with the rule. Take the necessary steps to repair the ramp so that the		28. To correct this action, the slope of the ramp has been corrected and is no longer too steep. The repair was made and completed on August 5, 2019.	08-05-19

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C 174	Continued From page 5 slope is not greater than a one inch rse for every foot of length. 29. At the time of the survey it was observed that there were loose and broken floor boards on the ramp and deck. This is not compliant with the rule. Take the necessary steps to repair these as necessary. 30. At the time of the survey it was observed that there were loose pickets on the deck. This is not compliant with the rule. Take the necessary steps to secure the loose pickets. 31. At the time of the survey it was observed that the dryer exhaust vent was clogged with lint. This is not compliant with the rule. Take the necessary steps to clean out the vent. 32. At the time of the survey the fire alarm was unable to be tested due to no key being available to reset the pull stations. This is not compliant with the rule. Take the necessary steps to have a key available for the follow up survey.	C 174	Please see the end of this report for further details 29. To correct this action, all of the loose and broken boards on the ramp and deck were repaired and completed on August 14, 2019. Please see the end of this report for further details 30. To correct this action, the loose pickets on the deck were repaired on August 14, 2019. Please see the end of this report for further details 31. To correct this action, the dryer exhaust vent was unclogged and repaired at the end of July 2019. Please see the end of this report for further details 32. To correct this action, new keys were made so that the pull stations can reset. This repair was made early August 2019.Please see the end of this report for further details. In conclusion, as part of our quality improvement program, we have listed the repairs to follow up and review the status during our quarterly meeting. To ensure this does not happen again, we will also have employees review areas closely on a regular basis to ensure compliance. This should allow Administration to identify the concerns quickly and make necessary repairs when needed.	08-14-19 08-14-19 July 2019 August 2019