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
	HAL037001	A. BUILDING: 01 B. WING _____	08/22/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GATES HOUSE	11 COMMERCE DRIVE GATESVILLE, NC 27938

(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 Construction Section Biennial Survey by Suzanna Fay and Frank Strickland conducted on August 22, 2019. Records indicate his facility was first licensed on June 1, 2015 for 70 beds including a 40 bed Special Care Unit. The facility is required to meet the 2005 Rules for Adult Care Homes of Seven or More Beds and the 2012 North Carolina State Building Code Section 407- Institutional Occupancy Group I-2 (Unrestrained). Deficiencies were cited that require a Plan of Correction.	C 000	Response 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 deficiency or corrective action report, the plan of correction is prepared soley as a matter of compliance with state law.	
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. Findings on August 22, 2019. a. SCU Courtyard - there is a 4"x 6" hole in the exterior soffit above the door. Holes in the soffit will allow pests to enter the facility. c. There is a washed out hole about 2' wide and 4' long outside of the Riser Room that is a fall hazard.	C 160	It is the policy of Gates House to assure PHYSICAL ENVIRONMENT as identified in rule area 10A NCAC 13F .0305. Facility will contact landscaping company to fill in washed out holes around the facility grounds to reduce fall risks. Facility will have holes in the exterior soffit above the doors filled in or covered to prevent pests from entering facility.	10/3/19 10/13/19

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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 d. There is a hole about 3' in diameter that has washed out at the downspout of one of the exterior storage units that is a fall hazard.	C 160		
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. Observations revealed that the facility did not have ceilings kept clean and in good repair. Findings on August 22, 2019: a. The HVAC supply vents throughout the facility had excessive condensation. The moisture was creating black mildew around the vents. In some of the areas, the ceiling finish was beginning to bubble up around the vent. 2. Observations revealed that the walls and furnishings were not maintained in good repair. Findings on August 22, 2019: a. Room 206 - the wall between the suites is damaged and the base is falling off. b. Room 209 - the base is coming off of the divider wall between bedrooms and at the bathroom wall. c. AL Library - the carpet is heavily stained.	C 164	It is the policy of Gates House to assure HOUSEKEEPING AND FURNISHINGS as identified in rule area 10A NCAC 13F.0306 Facility will contact HVAC contractor to have vents and ventilation fixed to prevent excessive condensation. Ceilings will have work completed to remove black mildew around the vents. Facility will have molding around the base of the walls repaired and carpet cleaned.	10/13/19 10/13/19

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C 164	Continued From page 2 d. Room 133 - the cove base is coming off of the walls at the door of the right bedroom. The bottom corner of the door is damaged.	C 164		
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 hazards. Findings on August 22, 2019: a. The supply air vents had an excessive amount of condensation throughout the facility. The condensate was dripping down on the floors creating a slip hazard. b. Room 133 - the towel rack at the sink has broken off leaving the hard metal bracket exposed. The hard edges could cause injury. 2. Based on observation the facility was not maintained free from hazards. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on August 22, 2019: a. Soiled Linen - there were three unsecured oxygen bottles on the floor of the room.	C 166	It is the policy of Gates House to assure HOUSEKEEPING AND FURNISHINGS as identified in rule area 10A NCAC 13F.0306 Housekeeping will perform 30 minutes checks to insure condensation from vents have not created slip hazards Metal bracket on wall have been removed. Oxygen tanks have been placed in metal racks to prevent them from falling over and placed in medication rooms on both Assisted Living and Special Care Unit.	8/29/19 8/29/19 8/26/19

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C 166	Continued From page 3 b. SCU Med Room - there were six oxygen bottles loose in a cardboard box. c. Storage by Room 125 - there were nine oxygen bottles stored in cardboard carrying cases on a shelf and there were eight oxygen bottles in a plastic rack on the floor.	C 166		
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 facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on August 22, 2019: a. SCU Courtyard - the emergency light by the door did not illuminate on test. b. SCU Courtyard - the emergency light on the side wall did not illuminate on test. c. Exit by Room 232 - the exterior emergency light did not illuminate on test. d. The emergency light outside of the guest bathrooms did not illuminate on test. e. AL Courtyard - the emergency light at the door did not illuminate on test.	C 189	It is the policy of Gates House to assure OTHER REQUIREMENTS as identified in rule area 10A NCAC 13F.0311 Facility will change batteries and insure all emergency lights and exit signs are properly working.	9/22/19

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C 189	Continued From page 4 f. The emergency light adjacent to Room 141 did not illuminate on test. g. The emergency light outside of Clean Linen did not illuminate on test. h. The emergency light adjacent to Room 117 did not illuminate on test. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on August 22, 2019: a. AL Courtyard - the exit light/sign was not illuminated. b. Service Corridor - the exit/emergency light did not illuminate on test. 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on August 22, 2019: a. The right leaf on the cross corridor doors by Room 221 did not latch when released by the fire alarm. 4. Based on observation and testing there is failure to maintain the facility's life safety equipment in a safe operating condition. Alarm boxes at the manual override switches for the magnetic locks that fail to alarm will not alert staff in the event of an elopement. Findings on August 22, 2019:	C 189	Facility will contact First Fire to have doors and latch fixed to release when fire alarm is activated.	10/13/19

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C 189	Continued From page 5 a. The alarm did not sound on the screamer box at the entrance to the SCU. b. The alarm did not sound on the screamer box at the exit by Room 215. c. Service Corridor - the alarm on the screamer box at the door going into the SCU did not sound. 5. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not function during a fire. Findings on August 22, 2019: a. Kitchen - the sprinkler head in the freezer unit has been removed and a rag was stuffed into the hole left by the head. 6. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on August 22, 2019: a. SCU Living Area - the cover plates for a ceiling junction box at the TV is loose leaving a gap in the fire rated ceiling assembly. b. Kitchen - there is a gap around the sprinkler head by the back exit where the escutcheon plate has dropped. 7. 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 holes through the door.	C 189	Facility will replace screamer boxes by entrance to Special Care Unit, exit by Room 215, and Service Corridor by Special Care Entrance. Facility will contact First Fire to have sprinkler in kitchen freezer replaced Facility will replace and tighten covers to insure there are no gaps.	10/13/19 10/13/19 9/22/19

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C 189	Continued From page 6 Findings on August 22, 2019: a. SCU Kitchen - there are two 3/8" diameter holes through the door at the hardware. b. Room 232 - there are two 3/8" diameter holes through the door at the hardware. c. Kitchen - there are two 3/8" diameter holes through the door at the hardware. 8. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin. Findings on August 22, 2019: a. Laundry Room - the doors were held in an open position using wedges. b. RCC Office - the door was held open using a wedge. 9. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on August 22, 2019: a. Men's Guest Toilet - the sink is not secure to the wall and the sealant is cracked and splitting. 10. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on August 22, 2019: a. Room 229 - the light switch box is loose on the bathroom wall. b. Riser Room - two of the straps are broken supporting the overhead electrical conduit.	C 189	Facility will replace door handle plates to cover holes around kitchen door on assisted living and special care unit, and room 232. Facility has removed wedges from all doors. Facility will have sink tighten to wall and sealant replaced Facility has tighten the cover to the light switch in room 229 bathroom. Facility will have straps in Riser Room replaced	9/22/19 8/23/19 10/13/19 8/27/19 10/13/19

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C 189	Continued From page 7 11. Observations revealed that the mechanical equipment was not maintained in a clean condition. Findings on August 22, 2019: a. There was a pattern of R/A grilles with excessive particulate build up.	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. Observations revealed that the facility did not maintain exhaust ventilation in required areas. Findings on August 22, 2019: a. Men's Guest Toilet - the exhaust fan was not working. b. Women's Guest Toilet - the exhaust fan was not working. c. Room 209 Bath - the exhaust fan is not	C 199	It is the policy of Gates House to assure OTHER REQUIREMENTS as identified in rule area 10A NCAC 13F.0311 Facility will repair exhaust fan in Men's Guest Bath, Women's Guest Bath, and Room 209 Bath	10/13/19

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C 199	Continued From page 8 working.	C 199		

9/13/19