

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL023041	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/19/2019
NAME OF PROVIDER OR SUPPLIER GOLDEN YEARS REST HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 630 SUGAR HILL ROAD LAWNDALE, NC 28090		
(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 September 19, 2019. Records indicate that this facility was licensed as a Home for the Aged with a capacity of 12 residents on 10/01/1976. Based on this information, this facility was surveyed using the 1967 N.C. State Building Code Section 407-Group "D"- Institutional Occupancy, the 1971 Minimum and Desired Standards and Regulation for Homes for the Aged and Infirm and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. Deficiencies were cited that require a Plan of Correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, and interview with Manager, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on September 19, 2019: a. The current Fire Alarm annual inspectioun and test in accordance with NFPA 72, is not available for review by the Surveyor.	C 111		

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

TITLE

(X6) DATE

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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 September 19, 2019: a. Right Ext Pathway - there is an unattended large plumber's drain cleaning machine and trash can, obstructing the required six feet width corridor to three feet. b. Right Ext - the corridor near the exit has a two TV tray and two chairs obstructing the required six feet width corridor to three feet six inches.	C 150		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staff's	C 183		

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C 183	Continued From page 2 ability to extinguish a small fire and permit it to grow larger. This would affect all residents, staff, and visitors by not identifying emergency equipment not in proper working order. Findings on September 19, 2019: a. Entire Building - since the last annual maintenance, performed in June 2019, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections.	C 183		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with Manager, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on September 19, 2019: a. In the 4th quarter for the last 12 months, no rehearsal occurred during 2nd shift.	C 185		

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C 189	Continued From page 3	C 189		
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 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 September 19, 2019: a. Front Door - the exit sign does not illuminate on backup power when tested. 2. 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 September 19, 2019: a. Pantry - there are to conduits not firestopped as they penetrate the fire-resistance-rated ceiling assembly. b. Shared Bathroom between Bedroom 3 & 4 - there is a pipe not firestopped as it penetrates the fire-resistance-rated ceiling assembly. 3. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on September 19, 2019:	C 189		

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C 189	Continued From page 4 a. Pantry - a bread cart is stored in front of the electrical panel, limiting the required 36-inches by 30-inches minimum clear working space. Deficiency corrected before Construction Surveyors departed site. b. Front Corridor - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. 4. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on September 19, 2019: a. Bedroom 1 - the corridor door latches to its frame, but a very light touch will cause the door to release. 5. Based on observations, the Facility's method of storing material in the facility was not maintained in a safe and proper operating condition for a non-sprinklered building. High storage could hinder firefighter availability to effectively provide manual hose streams of water to a fire. Findings on September 19, 2019: a. Linen Closet - materials are being stored within 24-inches of the ceiling. 6. Based on Observation and interview with Manager, the Building is not accessible for inspections. This will prevent any deficiency that may be discovered with regular inspections from being corrected. Findings on September 19, 2019: a. Camera Room - there is no key onsite to allow access into this area for inspection.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT	C 191		

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C 191	Continued From page 5 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 failed to prevent portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if heater is the ignition source of a fire. The danger increases if used by resident or combustible material is near. Findings on September 19, 2019: a. Administrator Office - a portable electric heater was found in this room.	C 191		
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	C 199		

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C 199	Continued From page 6 (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 rooms required to be mechanically exhausted. Findings on September 19, 2019: a. Half Bath - the required exhaust ventilation system does not work. b. Staff Bath - the required exhaust ventilation system does not work.	C 199		