STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL092181	A. BUILDING 01 B. WING	08/28/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE COVINGTON	4510 DURALEIGH ROAD RALEIGH, NC 27615

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay and Frank Strickland conducted on August 28, 2019. Records indicate that the Facility was first licensed on April 8, 1991. The facility is currently licensed for One Hundred Twenty (120) residents including Sixty (60) Special Care residents. Based on this information, the facility is required to meet the 1991 Minimum and Desired Standards and Regulations for the Licensing of Adult Care Homes; applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds; and the 1991 North Carolina State Building Code, Section 514.1- Institutional (I) Occupancy- Unrestrained. A sprinkler system was added in 2006 and is required to meet the 2006 North Carolina State Building Code. 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. Review of records revealed that the facility did not have current building safety inspection reports maintained in the home and available for review. Findings on August 28, 2019: a. There was not a current copy of the fire alarm	C 111	C-111 -Copies of the fire and sprinkler inspections have been provided. -Copies of inspection will be maintained in the Executive Directors office. -The corporate office will also maintain these records to ensure they are readily available. -The Maintenance Director will also keep a book of the records and monitor to ensure they are current. -Quarterly QA meetings will be conducted and deficiencies will be discussed times six months.	10-11-19

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C 111	Continued From page 1 system inspection report available for review. b. There was not a current copy of the fire sprinkler system inspection report available for review.	C 111		
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 ceilings were not kept clean and in good repair. Findings on August 28, 2019: a. Lower Level Living Room - there is a large yellow water stain on one ceiling tile in the back corner of the room. 2. Observations revealed that the walls were not kept clean and in good repair. Findings on August 28, 2019: a. Room 105 - there is a hole in the sheetrock behind the door. 3. Observations revealed that the floors were not kept clean and in good repair. Findings on August 28, 2019:	C 164	C-164 -Ceiling tile has been replaced in main living room. -The sheet rock has been repaired in room 105. -Room 128 has been deep cleaned. -Flooring around tile in men's bathroom on first floor has been repaired. -The Executive Director and Maintenance Director will make rounds together every 2 weeks to ensure the practice is not reoccurring. -Staff will complete work orders when areas of repair are needed. -Repetitive findings will be reported in the quarterly QA meeting and corrective measures put into place.	10-11-19

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C 164	Continued From page 2 a. Room 128 - there was debris in the corners of the room and behind the furniture. This was corrected at the time of survey. b. Ground Floor Men's Toilet - the floor around the toilet is stained and in a state of disrepair.	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 all hazards. Findings on August 28, 2019: a. SCU - the floors at the end of the east (Dining) hall were wet therefore slippery. Staff interview revealed that it was thought it was condensation. There was no signage posted to caution residents regarding the slippery floors. b. Room 104 - the door has a safety lock on the exterior of the door. The release did not work from the inside creating a trap hazard for the residents in the room. 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.	C 166	C-166 -When condensation is occurring on the floor a wet floor/hazard sign will be placed in the hallway. -Room 04 the safely lock has been repaired. -Oxygen bottles have been secured. -Staff will be in-service on the following practices. -E.D., Maintenance Director and Case Managers will do rounds every 2 weeks to ensure the practice does not reoccur. -Any negative finding will be brought to the quarterly QA meeting and discussed.	10-11-19

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C 166	Continued From page 3 Findings on August 28, 2019: a. Second Level Oxygen Storage - three oxygen bottles were being stored in a plastic crate and did not appear to be secure as all of the bottles were on one end of the crate and one of the bottles was tilting. An additional six bottles were sitting unsecured 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 there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire 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 28, 2019: a. Room 105 - the door drags on the frame making it difficult to close and latch. b. SCU Spa - the door has dropped and does not close completely. There is a gap at the top of the door. c. Room 255- the door drags on the frame	C 189		

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C 189	Continued From page 4 making it difficult to close and latch. 2. 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 28, 2019: a. One leaf on the cross corridor doors by Room 153 did not latch when closed upon activation of the fire alarm. 3. Based on observation there is a failure to maintain the building's suspended ceiling system. Findings on August 28, 2019: a. Room 110 - one of the ceiling tiles has been removed to repair a leak leaving openings in the ceiling assembly. b. SCU Soiled Utility - one of the ceiling tiles has been removed to repair a leak leaving openings in the fire ceiling assembly. c. SCU Supply Closet - one of the ceiling tiles has been moved leaving openings in the ceiling assembly. This was corrected at the time of survey. d. SCU Supply Closet by Dining/Recreation Room - two of the ceiling tiles have shifted in the grid leaving an opening in the ceiling assembly. e. SCU Storage across from SCC Office - two of the ceiling tiles have been removed to repair a leak leaving openings in the ceiling assembly. f. Riser Room (Laundry wall) - there is a 1" cable penetration that has not been sealed. 4. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain 18" clearance below	C 189	C-189 -Room 105 door has been repaired. SCU spa door has been repaired. Room 153 door has been repaired. Room 110 the ceiling tile has been replaced. SCU sealed utility room ceiling tile has been replaced. SCU supply closet ceiling tile was corrected. Storage closet across SCC office ceiling tile replaced. Riser room laundry wall cable has been sealed. Linen storage closets have been corrected to the 18" requirement of sprinkler head. Room 114 and 110 exhaust van has been cleaned. Door hardware has been repaired by room 236. Ice maker drain has been raised. Door wedge has been removed. Toilet has been repaired in the men's bathroom. -Staff will be in-service on the following practices -E>D> and Maintenance Director will keep monthly PM checks on the following practices. -Any negative findings will be brought to the quarterly QA meeting and discussed.	10-11-19

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C 189	Continued From page 5 the sprinkler heads creates an obstruction which limits the ability of the sprinkler system to suppress a fire. Findings on August 28, 2019: a. General Storage by Room 104 - packages of adult diapers were stored to within 12" of the ceiling. b. Second Level Linen Storage - blankets and other linens were stored to within 6" of the ceiling. 5. Observations revealed that the mechanical equipment was not maintained in a clean condition. Findings on August 28, 2019: a. Room 110 - there is an accumulation of dust on the bathroom exhaust fan vent. b. Room 144 - there is an accumulation of dust on the bathroom exhaust fan vent. 6. 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 or gaps between the door and the door frame stops. Findings on August 28, 2019: a. Storage by Room 236 - the door hardware does not fit in the door opening leaving a sliver of a hole at the hardware. 7. Based on observation there is a failure to install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping with a minimum 2" air gap could effect all occupants of the facility if the domestic water supply became contaminated.	C 189		

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C 189	Continued From page 6 Findings on August 28, 2019: a. Kitchen - the icemaker drain line was resting directly on top of the floor drain. 8. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on August 28, 2019: a. Kitchen Pantry - the door was held open using a wedged device. 9. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on August 28, 2019: a. Ground Floor Men's Toilet - the toilet was not secured to the floor.	C 189		10-11-19
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (k) This Rule shall apply to new and existing	C 195	C-195 -Plumber out to repair mixing values and other adjustments on 9-12-19 both rooms are holding the proper tempts. -Water temps checked on a weekly p.m. schedule and any other problems area identified. -Any out of range temps will be addressed promptly by Maintenance Director or plumber. -All negative findings will be will be discussed in the quarterly QA meeting and further action will take place if needed.	

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C 195	Continued From page 7 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 water temperatures were not maintained between 100 and 116 degrees Fahrenheit at fixtures used by residents. Findings on August 28, 2019: a. The water temperature at the sink in the ground floor Women's Toilet was 89 degrees Fahrenheit. b. The water temperature at the Beauty Salon sink was 89 degrees Fahrenheit.	C 195		10-11-19
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	C 199	C-199 -Exhaust fans for SCU maintenance room. Room 258 bathroom, ground floor sealed. Utility room ground floor women's toilet and men's bathroom have been ordered. -Maintenance Director will do a walk thru to ensure all 5 areas for potential deficiencies are working properly. -Maintenance Director to do monthly walk thru to ensure all exhaust fans are working properly. =Any negative finding will be brought to the quarterly QA meeting and discussed.	

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C 199	Continued From page 8 maintain exhaust ventilation in required areas. Findings on August 28, 2019: a. SCU Maintenance Room - the exhaust fan is not working. b. Room 258 - the bathroom exhaust fan is not working. c. Ground Floor Soiled Utility - the exhaust fan is not working. d. Ground Floor Women's Toilet - the exhaust fan is not working. e. Ground Floor Men's Toilet - the exhaust fan is not working.	C 199		