Lawndale Manor, Inc.
Assisted Living Facility

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FACSIMILE TRANSMISSION

DATE: October 4, 2019

TO: Ed Miller

ATTENTION: Ed Miller

FAX NUMBER: (919) 733-6592

FROM: Jody Faircloth

NUMBER OF PAGES TRANSMITTED (Including this sheet) 10

NOTE: Corrective Action Response

Thank You.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL092017	A. BUILDING: 01 B. WING _____	09/12/2019

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on September 12, 2019. Records indicate this facility was first licensed on March 25, 1991. The facility is currently licensed for 62 Beds. Therefore, the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1991 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1991 Edition of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies were cited that require a Plan of Correction.	C 000	Corrected. Spoke with all staff on issue Explained the importance of Why these rooms are and must stay locked C. 143.	9/19/19 JF
C 143	Janitor's Closets-Locked SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be monitored while in use; This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not having separate locked areas for substances that may be hazardous if ingested, inhaled or handled. This deficiency affects all residents, who my accidently use or encounter one of these hazardous substances. Findings on September 12, 2019:	C 143		

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C 143	Continued From page 1 a. Both 200 Hall Janitor Closets - the corridor doors to these rooms are not locked and there are cleaning agents, bleaches, pesticides, and other hazardous substances in these rooms.	C 143	Corrected spoke to all staff on inservice. Explain the importance of why these rooms should and must stay locked	9/16/19 JF
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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on September 12, 2019: a. Bathroom near Bedroom 208 - the ventilation system has an excessive accumulation of dust/lint and one halfe of the damper appears to have dropped. b. Laundry - the ventilation system has an excessive accumulation of dust/lint. 2. Based on observation, the building Floors are not kept clean and in good repair. Findings on September 12, 2019: a. Entire Building - there is a pattern exhibited where 20 or more vinyl composition floor tile are chipped. b. Bedrooms - there is a pattern where the bedroom floors are not clean.	C 164	Fowlerson came out on 9/20/19. and worked on the exhaust fans. They had to order several. They will be back at a later date to finish. when parts come in. starting to work on floors the week of 10-7-19	9/20/19 JF JF

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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. Based on Observation, the Building was not maintained free of hazards, if compress gas cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on September 12, 2019: a. Medical Records - a portable medical oxygen cylinder is standing up on the floor not physically secured in a rack, stand or chained to the structure.	C 166	Corrected on site 9/12/19 KP	9/12/19 KP
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 ability to extinguish a small fire and permit it to	C 183	Fire extinguishers have been inspected by in-house maintenance personnel. JF	9/30/19

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C 183	Continued From page 3 grow larger. This would affect all residents, staff, and visitors by not identifying emergency equipment not in proper working order. Findings on September 12, 2019: a. Entire Building - since the last annual maintenance, performed in April 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 Executive Director/Administrator/Maintenance Director/Technician/Manager, fire safety rehearsals are not being documented with at least one per shift for each quarter. Findings on September 12, 2019: a. For the last 12 months, no documentation of rehearsals occurred on any shifts.	C 185	Rehearsals have been done monthly, see attachments faxed over 9/16/19 JF 10/1/19 JF	

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C 189	Continued From page 4	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 Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on September 12, 2019: a. Entire Building - when the fire alarm is activated, the hold open devices released their doors closing the openings in the Firewalls. When the fire alarm system is put into silence mode, these hold open devices reenergized, which allows the Firewall doors to be held open during an alarm. 2. 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 12, 2019: a. Corridor near Bedroom 112 -the self-contained emergency light is making a buzzing sound and did not illuminate on backup power when the test button is pushed. b. Central Corridor near Dining- the	C 189	BAPE will be coming out to fix. 10/18/19 maintenance fixed issues 9/11/19	

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C 189	Continued From page 5 self-contained emergency light did not illuminate on backup power when the test button is pushed. c. Right Exit - the self-contained combination exit sign/emergency light unit did not illuminate on backup power when the test button is pushed. 3. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on September 12, 2019: a. Kitchen -since April 2019, when the last semi-annual maintenance was performed on the commercial kitchen hood's fire suppression system, there has been no documentation of the monthly in-house/owner inspections. 4. 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 12, 2019: a. Bedroom 211 - there is a gap at the base of the heat detector not firestopped as it penetrates the fire-resistance-rated ceiling assembly. 5. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on September 12, 2019: b. Bedroom 215 - the corridor door has a wreath hanger that is interfering with the closing and latching of the door to its frame. c. Bedroom 208- the door handle is very loose and may not function properly when used and is	C 189	Inspected by Administrator and will do on monthly basis 9/16/19 JF a.) Working on this. 10/15/19 maintenance will inspect monthly. b.) maintenance fixed 9/16/19 c.) maintenance fixed 9/16/19	

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C 189	Continued From page 6 not smoke tight. d. Bedroom 207 - the corridor door hits a bed and will not close and latch. 6. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on September 12, 2019: a. 100 Hall Mechanical Room - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle running pumps. b. External Electrical Room - many items are stored in front of the electrical panels, limiting the required 36-inches by 30-inches minimum clear working space. c. Back Porch - the ground-fault circuit-interrupter (GFCI) electrical power receptacle does not trip when its test button is pushed or when tested with a ground fault receptacle tester & circuit analyzer. 7. 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 12, 2019: a. Maintenance Office - materials are being stored within 24-inches of the ceiling. b. 100 Hall Linens - Linens are being stored within 24-inches of the ceiling. c. 100 Utility Room - Materials are being stored within 24-inches of the ceiling. d. External Electrical Room - materials are being stored within 24-inches of the ceiling. 8. Based on observations, the Facility's method	C 189	D) fixed beds will be moved from right of the door. A) maintenance fixed B) maintenance fixed C) maintenance fixed issue. Spoke with all staff about storage.	JF 9/16/19 9/16/19 9/16/19

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C 189	Continued From page 7 of storing combustible material in Mechanical Rooms was not maintained in a safe and proper condition. Findings on September 12, 2019: a. 100 Hall Mechanical - combustible boxes, and a Christmas tree is being stored within this room.	C 189	Resolved SF 9/11/19	
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 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 the use of 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 12, 2019: a. Assistant Health Service Director Office - two portable electric heaters were found in this room. Deficiency corrected before Construction Surveyors departed site. b. Refreshment - a portable electric heater was found in this room. Deficiency corrected before Construction Surveyors departed site.	C 191	Corrected 9/12/19 KP	

Division of Health Service Regulation

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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. 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 12, 2019: a. Bedroom 211 Bathroom - the required exhaust ventilation system does not work. b. 200 Hall Utility Room - the required exhaust ventilation fan is humming and does not draw any air. c. Bedroom 108 Bathroom - the required exhaust ventilation system does not work. d. 100 Hall Handicapped Bathroom - the required exhaust ventilation system does not work. e. Central Hall Women - the required exhaust ventilation system does not work. f. Central Staff Lounge - the required exhaust ventilation system does not work. g. Laundry - the required exhaust ventilation	C 199	all exhaust fans were cleaned & several ordered. Two need replacing. See attachment	JF 10/[illegible]/19

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C 199	Continued From page 9 system does not work.	C 199		