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
	HAL051003	A. BUILDING: ~~01~~ 2 B. WING	09/11/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUTUMN HOME CARE OF JOHNSTON COUNT	474 JERRY ROAD SELMA, NC 27576

(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 11, 2019. Records indicate that this Facility was first licensed on 12/18/1985. The facility is currently licensed for 12 Beds. Therefore, the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1978 (Revision 5) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1984 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. Deficiencies were cited that require a Plan of Correction.	C 000		
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 Ceilings are not kept clean and in good repair. Findings on September 11, 2019: a. Shower Room - the box around the smoke damper is not secure to the ceiling.	C 164	SECURED BOX AROUND THE SMOKE DAMPER	10/4/19

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

ADMINISTRATOR | 10/9/2019

Division of Health Service Regulation

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C 185	Continued From page 1	C 185		
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 of the last 12 months of rehearsals, and interview with Administrator the Facility failed to fully document the staff members present, and a short description of what the rehearsal involved. Findings on September 11, 2019: a. The rehearsal records do not provide a list of staff members present for all the rehearsals. b. The rehearsal records do not provide a short description of what the rehearsal involved for all the rehearsals.	C 185	10/11/19 WILL CONTINUE MONTHLY FIRE ALARM DRILLS AND WILL DOCUMENT THE DRILL WITH STAFF MEMBERS LISTED AND A DESCRIPTION OF THE REHEARSAL	
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	C 189		

Division of Health Service Regulation

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	HAL051003	A. BUILDING: OF 2 B. WING _____	09/11/2019

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C 189	Continued From page 2 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 failed to maintain the electrical system in a safe and operating condition. Findings on September 11, 2019: a. Front Porch - the ground-fault circuit-interrupter (GFCI) electrical power receptacle does not have electrical power, therefore it cannot be tested for ground fault.	C 189	REPLACED GFI AND OPERATES PROPERLY	9/20/19
	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 11, 2019: a. Office Bathroom Closet - there is a gap around the base of the heat detector not firestopped as it penetrates the fire-resistance-rated ceiling assembly.		CAULKED WITH 3M FIRE BLOCK SEALANT	9/20/19
	3. 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 11, 2019: a. Linen Closet - linens are being stored within 24-inches of the ceiling.		REMOVED LINENS FROM TOP OF CLOSET TO CLEAR 24" FROM CEILING. TALKED WITH STAFF AND POSTED A SIGN AS A REMINDER OF 24" CLEARANCE	9/12/19
C 199	Exhaust Ventilation	C 199		

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C 199	Continued From page 3	C 199		

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 11, 2019:
a. Handicapped Bathroom - the required exhaust ventilation system does not work.
b. Women's Half Bathroom - the required exhaust ventilation system does not work.
c. Laundry - the required exhaust ventilation system does not work.
d. Utility Room across from Women - the required exhaust ventilation system is running but is not removing enough air to pull up the surveyor's thin plastic sheet.

ALL FOUR FAN MOTORS ARE IN PROCESS OF BEING REPLACED. 10/22/19

I WILL CONTINUALLY MONITOR EXHAUST FAN OPERATIONS.

10/9/2019