STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL049016	A. BUILDING: **01** B. WING _____	**09/04/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OLIN VILLAGE	**999 TABOR ROAD** **OLIN, NC 28660**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on September 4, 2019. Records indicate this facility was originally licensed on April 1, 1968. There was a later addition to the building on May 4, 1987 that increased the total capacity to 64 beds. Based on this information, the older portion of the facility was surveyed using the 1967 NC Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds. The newer portion of the building, to the rear and left of the fire wall nearest the kitchen, was reviewed using the 1978 NC State Building Code, the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds 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.	C 164	Kitchen - Ice machine drain line was raised up to be out of contact with the drainage system on 9/17/19. Maintenance staff will monitor ice machine drain line to ensure there is no contamination.	

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C 164	Continued From page 1 This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to keep plumbing system devices clean and in good repair. Findings on September 4, 2019: a. Kitchen - the ice machine drain line is in direct contact with the drainage system. This allows contaminated water from the drainage system to back flow up into the ice machine. 2. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on September 4, 2019: a. Bathroom 2 - the ventilation system has an excessive accumulation of dust/lint. b. Staff Half Bathroom - the ventilation system has an excessive accumulation of dust/lint.	C 164	Ventilation system in Bathroom 2 and Staff Hall Bathroom will be cleaned and restored to proper working order on 10/4/19. Maintenance staff will monitor the ventilation system/fans in these areas to keep them in good working order.	
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 4, 2019: a. Nurse Station - a large portable medical	C 166	The oxygen cylinder was removed from the Nurse Station and placed in proper storage shortly after the survey on 9/4/19. Staff was instructed not to store oxygen cylinders in this location. Maintenance staff will monitor to ensure compliance.	

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C 166	Continued From page 2 oxygen cylinder is standing up on the floor, not physically secured in a rack, stand or chained to the structure. b. Nurse Station - 5 portable medical oxygen cylinders are standing up on the floor in an unapproved plastic beverage crate not physically secured in racks, stands or chained to the structure. 2. Based on Observation, a hazard is present due to the possibility of the backflow of contaminated water into the domestic water supply. Findings on September 4, 2019: a. Tub/Shower Room - the shower is equipped with a 4-inch high step over curb, and a handheld shower wand with hose. The hose is long enough to reach gray water and is not equipped with a vacuum breaker to prevent the backflow of water.	C 166	A vacuum breaker was installed to prevent backflow of water on 9/13/19. Maintenance staff will monitor this repair to ensure that it remains in proper working order and is not allowing contamination.	
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 grow larger. Findings on September 4, 2019: a. Entire Building - since the last annual	C 183		

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C 183	Continued From page 3 maintenance, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections. 2005-185 Fire Safety-Rehearsal on Each Shift 1. Based on Record review of the last 12 months of rehearsals, and interview with Director and Owner, the Facility failed to fully document the, a short description of what the rehearsal involved and the simulated fire location. Findings on September 4, 2019: a. Some of the rehearsal records do not provide a short description of what the rehearsal involved. b. Most of the rehearsal records do not provide documentation of the simulated fire location.	C 183	Inspections will be done monthly by the Maintenance Staff to ensure compliance with the Rule area. Facility Director called the fire extinguisher monitoring company on 9/4/19 to request the new tags to replace the out-of -date tags. Facility Director will monitor compliance as well in this area. Facility will start fully documenting the fire safety rehearsals to include both a short description of what the rehearsal involved and the simulated fire location. Director will review the records periodically to ensure that this information is included.	
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, 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 4, 2019: a. Exit near Nurse Station - vegetation is encroaching onto the exit ramp.	C 189	Vegetation trimmed so as not to obstruct the exit near the Nurse's Station. Completed on 9/6/19. Maintenance will routinely monitor to ensure that there are no obstructions to exits. In the corridor near Bedroom 1 and the Basement, the gaps around the two cables and the gap around a conduit, respectively, where they penetrate the fire-resistance-rated ceiling were filled with fire-resistance caulk on 9/11/19. Maintenace staff will monitor areas to ensure that there are no gaps where cables, etc penetrate the ceiling in such areas.	

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C 189	Continued From page 4 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 4, 2019: a. Corridor near Bedroom 1 - there are gaps around two cables not firestopped as they penetrate the fire-resistance-rated ceiling assembly. b. Basement - there is a gap around a conduit 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 4, 2019: a. Maintenance Room - many items are stored in front of the electrical panel, limiting the required 36-inches by 30-inches minimum clear working space. b. Bedroom 4 - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. 4. 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 4, 2019: a. Corridor near Nurse Station - the exit sign is not completely secured to the ceiling. b. Lobby near Director Office - the exit sign is not illuminating on normal power making it difficult to read the word "EXIT". Exit signs must be fully illuminated to convey complete information related to the means of egress. c. Corridor near Bedroom 29- the self-contained emergency light did not illuminate on backup	C 189	Items in the Maintenance Room were removed from in front of the electrical creating the required 36"X30" workspace. Maintenance staff will monitor this area to ensure that the required space remains clear. Completed 9/6/19. The multiple plug adaptor in Bedroom 4 was removed on 9/6/19. Maintenance instructed Administrative staff to ensure that residents, families and all staff members are aware that this type of multiple plug adaptor is not to be used. The Exit Sign in the corridor near the Nurse Station was secured to the ceiling on 9/9/18. Maintenance staff will ensure all Exit signs are mounted properly to the ceiling in all areas. The exit sign in the lobby near the Director's office was removed and a new unit installed on 9/9/19. The new unit was tested by Maintenance staff to ensure full illumination. Maintenance staff will monitor the functioning of the exit signs throughout the facility to ensure proper working order.	

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C 189	Continued From page 5 power when the test button is pushed. 5. 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 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 4, 2019: a. Kitchen -since 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. 6. 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 4, 2019: a. Drink Room - stored materials must be maintained 24-inches below the ceiling. 7. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on September 4, 2019: a. Bedroom 10 - the corridor door is missing its strike plate; therefore, the door cannot latch into its frame to be smoke tight. b. Men Half Bathroom - the door does not latch into its frame when closed. c. Bedroom 18 - the corridor door is missing its strike plate; therefore, the door cannot latch into	C 189	The self contained emergency light in the corridor near Bedroom 29 was removed and a new unit was installed. The unit was tested by Maintenance staff to ensure that it did illuminate on backup power when the test button was pushed. Completed 9/9/19. Inspections will be done monthly on the kitchen hood's fire suppression system by the Maintenance staff. Facility Director will ensure compliance in this area as well and also work to ensure that the monitoring service does have the proper tags/stickers in place to show that the monitoring is being completed. Completed 9/4/19. Items in the Drink room were removed to allow for the 24 inch clearance to the ceiling. Maintenance staff will ensure that this rule area remains in compliance. Completed 9/6/19. Bedroom 10 and Bedroom 18 corridor door strike plates were installed to allow for proper latching on 9/23/19. Maintenance staff will ensure that all strike plates are present to allow for proper latching.	

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C 189	Continued From page 6 its frame to be smoke tight. d. Bedroom 25 - the corridor door frame stop is not secured to the strike jamb. This allows an intermittent gap between frame and stop. e. Bedroom 31 - the corridor door frame stop is missing from the strike jamb. This allows a long gap between door leaf and frame. 8. Based on Observation, the Building was not maintained in a safe and operating, because some building components fail to function as originally intended. Findings on September 4, 2019: a. Women Half Bathroom- the corridor door does not close unless extra force and/or effort is applied. Once closed, it takes a lot of strength to pull and operate this door equipped with a knob. 9. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on September 4, 2019: a. Bedroom 10 - the corridor door has a wedge holding the door open.	C 189	The door frame in the Mens Half Bathroom was sanded and the door adjusted to ensure proper closure. Maintenance staff monitor the that doors properly close making adequate connection with the latch for all doors within the facility. Completed 9/23/19. New door jambs were installed in corridor door frames of Bedrooms 25 and 31 allowing for proper closure of doors on 9/23/19. Maintenance staff will monitor all doors to ensure good working order. The corridor door of the womens half bathroom was adjusted to ensure proper opening and closing on 9/23/18. Maintenance staff will monitor all doors to ensure good working order. The wedge was removed from the corridor door of Bedroom 10 on 9/4/19. Administration will ensure that all other staff, residents and family members know that a wedge is not allowed to hold a door in an open position. Any use will be reported to the facility director.	
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	C 199		

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C 199	Continued From page 7 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 4, 2019: a. Bathroom 2 - the required exhaust ventilation system does not work. b. Laundry - the exhaust ventilation system does not work. c. Women Half Bath - the required exhaust ventilation system is running but is not removing any air. d. Men Half Bath - the required exhaust ventilation system is running, making a loud noise but is not removing any air. e. Bedroom 17 & 19 Shared Bathroom - the exhaust ventilation system does not work.	C 199	Fan motors were replaced in Bathroom 2, Laundry, Womens half bath, and Mens half bath to correct issues with fans either not working at all or not working sufficently enough to ventilate. Completed 10/1/19. Maintenance staff will monitor the exhaust ventilation system in all areas and replace, clean and repair as needed to ensure good, clean working order.	