Divis 2 1 of Health Service Regulation

STATE 1I NT OF DEFICIENCIES AND P· A N OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL096004	A. BUILDING: _____ B. WING _____	09/24/2021

NAME X PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WAYI E COUNTY REST VILLA NO 2	305 SOUTH VANCE STREET EUREKA, NC 27830

(X4) D PREI D TAC	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
D)10	Initial Comments The Adult Care Licensure Section conducted a complaint investigation survey on 09/24/21.	D 000		
D) 7	10A NCAC 13F .0306(a)(4) Housekeeping And Furnishings 10A NCAC 13F .0306 Housekeeping And Furnishings (a) Adult care homes shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more; This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations, interviews, and record reviews, the facility failed to maintain a North Carolina Division of Environmental Health sanitation score of 85 or above at all times. The findings are: Review of the facility's current NC Division of Environmental Health inspection report dated 09/08/21 revealed: -There were 21 total demerits and the classification was provisional. -There was documentation food inside the cupboard was not stored in sealed containers. -There were dead bugs, dander, droppings, and residue on every surface inside of the drawers	D 077	All food has been Stored in sealed Container, Daily monitor By the Manager. All dead Bugs, dander dropping and residue was cleaned in all drawers, Closets, night stands	10/1/21

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LABORATI Y DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Lorraine Best Adm. 10/28/2021

STATE FC 1 101 — 6899 — ZNC811 — If continuation sheet 1 of 7

Reviewed and Acknowledged 10/29/21 JAR
Spoke with Administrator on 10/29/12 was asked to use this most current POC. Another POC was sent previously. JAR

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D 077	Continued From page 1 and cabinets inside of the kitchen. -The particle board inside of drawers and cabinets of the kitchen were deteriorating and moisture damaged. -The kitchen sink was leaking into the cabinet below and the cabinet was damaged by water and mold. -There was no soap at the sink in the medication room. -There were stained linens from bed bug excrement (locations not specified). -The closets had dead bugs, live roaches, live spiders, and dirty floors (locations not specified). -There were dead bugs and debris along the base boards and under furniture (locations not specified). -There were holes in walls and damaged wall coverings (locations not specified). -There were dusty blinds and dead bugs accumulated on the window sills (locations not specified). -Roaches and bed bugs of all life stages were observed in every room of the facility. -There were spiders in the vents and closets. -Several biting flies were noted during the inspection. Interview with the Resident Care Coordinator (RCC) on 09/24/21 at 9:04am revealed: -She was aware the environmental health inspection report dated 09/08/21 revealed a provisional classification. -She could have been more active in dealing with environmental concerns cited in the environmental health inspection report dated 09/08/21. Interview with the RCC on 09/24/21 at 10:40am revealed: -There was hand soap in the medication room on	D 077	Kitchen CAbinets, and all Bedroom Area. 10/15/21 The Particle Board inside of Cabinets has been Repaired. 10/21/21 The Kitchen SINK faucet has been Replaced. 10/10/21 All Stained Linen has been replaced. 10/1/2021 All closet has been cleaned 10/15/21 This will be moniton By the manager Weekly. 10/16/21	

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D 077	Continued From page 2 09/08/21, when the health inspector came to the facility; however, the health inspector stated it was not enough hand soap for a perso n to wash their hands. -The residents came in and out of the facility all day, it was hard to prevent flies from entering the facility. -She could have kept linen clean and replaced furniture to prevent the facility from hav ing a low environmental health inspection score. -The facility had ordered new linen, comforters, mattresses and bed frames for the residents' rooms (not sure of date). Telephone interview with the Administrator on 09/24/21 at 11:53am revealed: -The environmental health inspection score was low because the facility staff were not cleaning and notifying the RCC of environmental concerns cited in the environmental health inspection report dated 09/08/21. -The facility had made a lot of improvements since the environmental health inspection on 09/08/21. -She did not realize the facility's environmental concerns were as bad as they were until the inspection on 09/08/21. -She came to the facility once per week to determine if any repairs needed to be made. -She noticed dead bed bugs behind furniture but had never seen any live bed bugs. -The RCC was responsible for ensuring repairs were made and the pest control company was notified to provide services for the facility. -She emailed invoices showing the purchases of linens and other items to the state office as well as her plan to get the facility back in to compliance. Observation of resident room #2 at 10:06am on	D 077	All Baseboard has been cleared. This will be monitor by the managen weekly. 10/20/21 All holes in wall/ceiling will be caulked and Repaired. 11/5/21 The facility has ordered new mattress for the facility on 10/19/21. New Beds were purchased on 9/13/2021 11/19/21 Bedrooms painted started the weekend 9/10/21. A Cleaning 9/13/21	

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D 1 7	Continued From page 3 09/24/21 revealed there were worn out sheets on the resident's bed. Observation of resident room #4 at 9:47am on 09/24/21 revealed there was a live bed bug on the floor between the residents' beds. Interview with the resident in resident room #4 on 09/24/21 at 11:50am revealed: -He had bites on his back and arm from bed bugs a month ago, but he had not been bitten recently by any bed bugs. -He informed the RCC the bed bugs were biting him a month ago. -Every time someone came into the facility and sprayed (not sure of dates), they would get rid of some of the bed bugs. Observation of resident room #3 at 9:55am on 09/24/21 revealed: -There was a dead bed bug in the bed and evidence of bed bug excrements on an electrical outlet. -There were bed bug excrements on the wall by the window. Interview with the resident in resident room #3 on 09/24/21 at 11:41am revealed: -He had bites from bed bugs a month ago, but the bites had cleared up. -He did not inform the facility of the bites he had a month ago. -He had not seen any bed bugs and had not had any bites since someone came in and sprayed. Interview with the RCC on 09/24/21 at 10:40am revealed: -The facility had changed from one pest control company to another pest control company because they felt they were not seeing any	D 077	Company was hired, to clean and help with repairs. New Linen ordered 9/27/21. Pillow ordered on 9/10/21. The adm. Retrained the managers, housekeeper and staff on 10/5/21 where to look for Bedbugs, or any other type of pest concerns. The cleaning Company will Be coming In the	10/20/21 10/5/21

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D)77	Continued From page 4 improvements when the company treated for the bed bug activity. -The new pest control company came to the facility on 09/17/21 to treat for bed bug activity. -The pest control representative informed the facility to allow the chemical used for treatment of the bed bugs to remain on the floors for a week before they cleaned the floors. -There was bed bug activity in Residents' rooms #3 and #4. -Residents' room #3 was the worse room with the bed bug activity. -She could have conducted heat treatments of the residents' personal belongings and checked the residents' room for bed bug activity. Attempted telephone interview with the local health department's environmental health inspector on 09/24/21 at 11:14am was unsuccessful. Interview with the pest control representative on 09/24/21 at 11:16am revealed: -He was contracted with the facility to treat the bed activity. -He came to the facility on 09/17/21 to treat for bed bug activity. -There was bed bug activity in the residents' room, but he was not sure which room numbers. -He was contracted to provide treatments for bed bug activity bi-weekly for at least 2 or 3 treatments including random inspections of the facility to ensure the treatments were effective. -He had not set a scheduled time to return with the facility, but he planned to follow- up with the facility the following week (did not specify date). -He provided guidance to the facility, which included to monitor personal belongings being brought into the facility, check to ensure no bed bugs were on staff's clothing, for staff to be	D 077	facility monthly to clean and make any types of repairs. Staff was trained on how to wash linen and resident personal belonging.	10/21/21

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D 077	Continued From page 5 careful when removing sheets from the residents' beds. -He did not discuss with the facility on 09/17/21 how to treat the residents' personal belongings but he would provide that guidance at the next follow-up appointment. The facility failed to maintain an approved North Carolina Division of Environmental Health sanitation score of 85 or above as evidenced by 21 demerits being cited on 09/08/21 and the Administrator was not aware of the facility's environmental conditions or needed repairs cited in the county environmental report. This failure was detrimental to the health, safety, and well-being of residents and constitutes a Type B Violation. The facility provided a plan of protection in accordance with G.S. 131D-34 on 10/13/21 for this violation. THE CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 8, 2021.	D 077		
D912	G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure residents	D912		

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D I 2	Continued From page 6 received care and services which were adequate, appropriate and in compliance with relevant federal and state laws and rules and regulations related to housekeeping and furnishings. The findings are: 1. Based on observations, interviews, and record reviews, the facility failed to maintain a North Carolina Division of Environmental Health sanitation score of 85 or above at all times. Refer to Tag D077, 10A NCAC 13F .0306(a)(4) Housekeeping and Furnishings (Type B Violation)].	D912		