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
	HAL065020	A. BUILDING: _____ B. WING _____	R 01/06/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHAMPIONS ASSISTED LIVING	1007 PORTERS NECK ROAD WILMINGTON, NC 28411

(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
{D 000}	Initial Comments The Adult Care Licensure Section conducted a follow-up survey from January 05, 2022 to January 06, 2022.	{D 000}	Champions Assisted Living acknowledges the receipt of the statement of deficiencies and proposes this plan of correction to the extent that the summary of findings is factually correct and in order to maintain compliance with applicable rules and provisions of quality of care of residents. The plan of correction is submitted as a written assertion of compliance. Responses to the stated deficiencies does not denote agreement with the statement of deficiencies nor does it constitute an admission that any deficiency is accurate. Further, Champions Assisted Living reserves the right to refute and incorporates by reference any rebuttal of deficiencies that it submits through informal dispute resolution, formal appeal and/or other administrative or legal procedures.	
{D 067}	10A NCAC 13F .0305(h)(4) Physical Environment 10A NCAC 13F .0305 Physical Environment (h) The requirements for outside entrances and exits are: (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure that the sounding device for 1 of 8 exit doors activated when the door was opened on the 3rd floor where 3 residents known to be disoriented and/or have wandering behaviors and had access to a stairwell exit that led to a 1st exit door to the outside of the building which was unlocked and had no sounding device. The findings are: Observation during the initial tour of the 3rd floor on 01/05/22 at 9:59am revealed the exit door to	{D 067}	10A NCAC 13F .0305(h)(4) Physical Environment The alarm on the 3rd floor exit door by the stairwell near resident room 321 was repaired on 1/6/22. An alarm was installed on the door by the first floor stairwell on 1/6/22. Executive Director (ED) or designee will monitor door alarm functioning weekly for one month to ensure compliance.	2/5/22

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Caitlin Flowchart | Executive Director | 2/2/22

The Plan of Correction was received via email on 02/02/22. The plan of correction with an addendum was reviewed, acknowledged. Refer to page 2 of this Statement of Deficiencies. — [illegible] RN 02/23/22

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{D 067}	Continued From page 1 the stairwell next to resident room 321 was unlocked and there was no alarm sound. Review of an untitled and undated facility document with resident names and documentation of disorientation and wandering behaviors revealed there were 3 residents with disorientation and 1 resident had wandering behaviors on the South hall with resident rooms from 320 through 329. Interview with medication aide (MA) on 01/05/22 at 10:01am revealed: -All the stairwell exit doors were locked with a keypad system and were always supposed to be kept locked. -Someone must not have closed the door all the way; it was now closed and locked. Interview with a personal care aide (PCA) on 01/05/22 at 10:01am revealed: -All the residents on the 3rd floor were confused and had wandering behaviors except one. -Most of the residents did not leave the 3rd floor when they wandered. -One resident had an electronic safety bracelet. Observation of the exit doors on 01/06/22 from 8:37am through 8:48am revealed: -At 8:37am, the 3rd floor exit door by the stairwell and near resident room 321 unlocked after pressing on the push bar for 15 seconds. -There was a clicking sound from the keypad lock while pressing on the push bar. -The clicking sound stopped when the door lock released and there was no alarm sound. -By the 1st floor stairwell, there was an unlocked door with no keypad lock that opened to the outside of the building near the front entrance. -There was a second door with a push button	{D 067} D67	Addendum per telephone with Ms. Flockhart, ED on 02/15/22 and 02/22/22: The ED/Designee will Check the Sounding alarm on Random exit doors daily on each level of facility. The ED/ Designee will check/ Sounding devices on all exit doors monthly. [signature] 02/23/22	

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{D 067}	Continued From page 2 release to unlock the door and an alarm sounded when the door was unlocked. -The door opened to the special care unit (SCU) near room 121. -The alarm stopped when the door closed completely. -At 8:48am, the 3rd floor exit door by the stairwell remained unlocked and the keypad indicated the lock and alarm were disarmed. Interview with a MA on the SCU on 01/06/22 at 8:51am revealed: -No residents had entered the SCU from the stairwell door since July 2021. -All door alarms came to pagers carried by staff. -Her pager showed the alarm came from the southwest stairwell. -She had to reset the lock and alarm on the keypad by the stairwell door. Interview with a personal care aide (PCA) on 01/06/22 at 2:28pm revealed: -Staff were not responsible for periodically checking all exit doors on the Assisted Living (AL) section during their shift to ensure the exit doors were locked/and armed with an alarm. -When an exit door was opened and the alarm sounded, staff were responsible to immediately see why the exit door was alarming. -There were some residents with confusion, diagnosed with dementia and some residents with wandering behaviors residing on the AL section of the facility. Interview with a maintenance staff on 01/06/22 at 8:59am revealed: -He had to manually reset the alarm and lock from the keypad on the 3rd floor stairwell door near resident room 321. -The doors were supposed to automatically reset	{D 067}		

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{D 067}	Continued From page 3 once the door closed. -The alarm company was at the facility on 01/05/22 and the door lock and alarm worked then. -The clicking sound coming from the keypad was supposed to be an alarm. -The clicking indicates the start of the 15 second delay before the door unlocks. -He had not been made aware of any problems with the door lock or alarm before 01/06/22. Interview with the repairman from the alarm company on 01/06/22 at 1:45pm revealed: -The alarm and locks on the exit doors had to be reset on the keypad after the door has been unlocked. -A code had to be entered to reset the lock and the alarm. -The system had been that way since the building was there. -He did not know why the 1st floor exit door did not have lock and alarm. -The alarms and locks were on the doors to let staff know someone has exited out the door. -The audio speaker device for the alarm on the 3rd floor stairwell door near resident room 321 was the issue not the lock. -The lock did not automatically reset. -The door did not have a working alarm sounding device to alert staff to enter the code and reset the alarm and lock. Interview with the Administrator on 01/06/22 at 9:25am revealed: -She contacted the alarm company on 01/06/22 to check the 3rd floor exit door to the stairwell near resident room 321. -When an exit door was unlocked an alert goes to pagers carried by all staff. -The pagers do not indicate which floor, only	{D 067}		

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{D 067}	Continued From page 4 which stairwell such as southwest. -All staff were expected to check and make sure all residents were accounted for when an exit door alarm went off by conducting a head count. -The maintenance staff completed checks of the exit door alarms quarterly as part of the facility's life safety checks. -Maintenance staff were responsible for checking the exit door locked engaged, alarm sounded when opened and that staff responded to alarms. -Maintenance staff documented the quarterly checks and the Maintenance Director kept the record of the checks. -The alarm company checked the exit door alarms annually. -There were no issues with any exit door alarms reported to her prior to 01/06/22.	{D 067}		