Fax Transmission

Attention to:-

Name: DHSR
Company: NCDHHS
Fax: 9197336592
Date: 07-14-2023
Time: 09:06:55 A

From:-

Name: Bryson Senior Living
Company: Bryson Senior Living
Fax:
Telephone:
Pages: 8

RE:

Comments/Notes:

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
	HAL087009	A. BUILDING: 01 B. WING _____	06/07/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRYSON SENIOR LIVING	314 HUGHES BRANCH ROAD BRYSON CITY, NC 28713

(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 Construction Section Biennial Survey by Suzanna Fay conducted on June 7, 2023. Records indicate this facility was first licensed April 26, 2018 as an HA for 50 residents. Based on this information, the facility is required to comply with the applicable portions of the 2012 Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. Deficiencies were cited and a Plan of Corrections is required.	C 000	Responses to the sited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusion set forth in the Statement od Deficienced report. The Plan of Correction is prepared soley as a matter of compliance with State law.	
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Observations revealed that the facility does	C 101	10A NCAC 13F .0301 1) Fire alarm monitoring company (First Fire) repaired electromagnetic Lock System on 6/8/2023 2)Fire alarm monitoring company (First Fire) repaired electromagnetic Lock System on 6/8/2023	6/8/2023 6/8/2023

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C 101	Continued From page 1 not meet code requirements in effect at the time of construction. Doors in buildings with special locking arrangements must unlock upon actuation of the automatic fire detection system or automatic sprinkler system. Findings on June 7, 2023: a. The electromagnetic locks at the exit doors did not release upon activation of the fire alarm. 2. Observations revealed that the facility does not meet the requirements of NFPA 72. All doors that are required to be unlocked by the fire alarm system shall remain unlocked until the fire alarm condition is manually reset. Findings on June 7, 2023: a. The cross corridor doors re-magnetized when the fire alarm was placed in silent mode.	C 101		
C 144	Med Prep Area-Sink with Lever Handles SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (5) Handwashing facilities with wrist type lever handles shall be provided immediately adjacent to the drug storage area; This Rule is not met as evidenced by: 1. Observations revealed that the handwashing facilities in the drug storage area (Med Room) were not equipped with wrist type lever handles. Findings on June 7, 2023: a. Med Room - the handwashing sink was not	C 144	10A NCAC 13F .0305 1) Replacement ficture has been ordered and will be installed upon arrival.	7/14/2023

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C 144	Continued From page 2 equipped with wrist type lever handles.	C 144		
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. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair. Findings on June 7, 2023: a. Front door - there is a large spider web over the front door full of small insects. This was cleaned at the time of survey. b. Beauty Salon - there is a large water stain on the ceiling near the back corner of the room and the ceiling finish is cracked and splitting. c. There is a pattern of water seeping under the vinyl floor of the resident baths and staining the floor in front of the shower. d. Room 309 Bath - there are water stains on the ceiling around the exhaust fan.	C 164	10A NCAC 13F .0306 1a) Corrected 6/7/2023 1b) Corrected 6/12/2023 1c) Stained flooring in resident baths will be replaced. 1d) Corrected 6/12/2023	6/7/2023 6/12/2023 8/1/2023 6/12/2023
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 166		

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C 166	Continued From page 3 (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. Observations revealed that the facility was not maintained free of all hazards. Broken accessories leave the sharp metal edges of the wall brackets exposed which can cause injury to residents, staff or guests. Findings on June 7, 2023: a. Women's Guest Bath - the toilet paper dispenser is broken leaving the sharp metal edges of the wall bracket exposed. This was corrected at the time of survey. b. Room 115 Bath - the toilet paper dispenser is broken leaving the sharp metal edges of the wall bracket exposed. 2. Based on observation the facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on June 7, 2023: a. 100 Hall Med Room - there are four shallow plastic crates with oxygen bottles that are not secured. There are approximately eight oxygen bottles sitting unsecured on the floor.	C 166	10A NCAC 13F .0306 1a) Corrected on 6/7/2023 1b) Corrected 6/12/2023 2a) Oxygen will be stored in appropriate containers to insure they are secured properly.	6/7/2023 6/12/2023 7/17/2023
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

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C 189	Continued From page 4 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. Observations revealed that all life safety electrical equipment was not maintained in a safe and operating condition. Faulty or broken call systems will not allow residents to call for help during an emergency. Findings on June 7, 2023: a. Women's Guest Bath - tissue paper was stuffed into the pull of the call button preventing someone from using the device. This was corrected at the time of survey. 2. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Use of materials that are not fire resistant rated could allow fire and smoke to spread beyond the area of origin. Findings on June 7, 2023: a. Typical for each hall - the cable penetrations for the Luminex boxes were sealed using an orange foam product that does not meet the required fire resistant rating. 3. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Loose toilet seats can cause injury from a slip or fall.	C 189	10 A NCAC 13F .0311 1a) Corrected 6/7/2023 2a) The seal around luminant boxes will be replaced with a fire resistant seal 3a) Corrected on 6/8/2023 4a) Door latch protectro to be installed to ensure there is no gap or hole through fire resistant door. 4b) Fire resistant plate to be installed ove 20 inch square louver to ensure here is no gap or hole through fire resistant door. 5a) Corrected on 6/7/2023	6/7/2023 7/14/2023 6/8/2023 7/30/2023 7/30/2023 6/7/2023

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C 189	Continued From page 5 Findings on June 7, 2023: a. Room 111 Bath - the toilet seat is loose. 4. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps through doors in fire resistant rated corridors could allow fire and smoke to spread beyond the area of origin. Findings on June 7, 2023: a. Med Room - there is a 1/4" hole through the door above and below the door hardware. b. Janitor Closet by Office - there is a 20" square louver in the corridor door. 5. Based on observation the facility's fire safety equipment is not maintained in operating condition. In order to be effective in putting out a fire, the nozzles of the kitchen hood suppression system should be pointed at the cooking surfaces. Findings on June 7, 2023: a. Kitchen - the nozzles on the hood suppression system were directed at the shelf above the cooking surfaces. This was corrected at the time of survey.	C 189		
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	C 199	10A NCAC 13F .0311 1a) Exhaust motor has been replaced. 1b) Exhaust motor has been replaced. 1c) Exhaust motor has been replaced. 1d) Exhaust motor has been replaced. 1e) Exhaust motor has been replaced	 7/30/2023 7/30/2023 7/30/2023 7/30/2023 7/30/2023

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C 199	Continued From page 6 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. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings on June 7, 2023: a. 100 Hall - the exhaust fans are not working on this hall. b. Kitchen Janitor's Closet - the exhaust fan is not working. c. Soiled Linen - the exhaust fan is not working. d. Laundry - the exhaust fan is not working. e. Janitor's Closet by Office - the exhaust fan is not working.	C 199		