

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____

TITLE

(X6) DATE

STATE FORM

6899

UQJC21

If continuation sheet 1 of 9

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/14/2023
NAME OF PROVIDER OR SUPPLIER LAWNDALE MANOR		STREET ADDRESS, CITY, STATE, ZIP CODE 601 LAKESIDE DRIVE GARNER, NC 27529		
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C 162	Continued From page 1	C 162		
C 162	Outside Premises-Outdoor Lighting SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (3) Outdoor walkways and drives shall be illuminated by no less than five foot-candles of light at ground level. This Rule is not met as evidenced by: 1. Observations revealed that the outdoor walkways were not illuminated. Findings on June 14, 2023: a. 100 Hall - the bulb at the stoop was burned out. The bulb was replaced at the time of survey.	C 162		
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 are not kept clean and in good repair. Findings on June 14, 2023: a. The vinyl tile flooring in the Refreshment Area and in the Nurses' Station is dirty and heavily	C 164	<i>6/14/23</i> If cont Checked Weekly <i>APK</i>	

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C 164	Continued From page 2 scuffed. One tile in the Refreshment Area is broken and the tile under the first chair in the Nurses' Station is worn down. b. 100 Hall Shower Bath - the paint on the wall beside the toilet is chipped and flaking along the tile base. c. Utility Room - there is a 12" diameter gray stain on the ceiling at the back wall. d. 200 Hall Shower Room - there is a heavy accumulation of dust on the exhaust fan vent and on the radiation damper. 2. Observations revealed that the furnishings were not kept in good repair. Bathroom doors that do not close and latch do not allow privacy between residents while bathing or dressing. Findings on June 14, 2023: a. Room 107 - the bathroom door drags on the floor preventing it from closing for privacy.	C 164 <i>6/15/23</i> <i>6/15/23</i> <i>6/15/23</i>	<i>cleaned</i> Tile Repaired <i>cleaned</i> Maintenance repaired.	
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 there is a failure to maintain the facility free from hazards. Means of egress or exit paths that are obstructed or blocked could delay or hinder emergency	C 166		

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C 166	Continued From page 3 evacuation of the occupants from the facility. Findings on June 14, 2023: a. 100 Hall - there are four large chairs partially blocking the exit door and reducing the egress path to less than six feet. 2. Observations revealed that the facility was not maintained in an uncluttered, clean and orderly manner, free of all obstruction and hazards. Excessive storage of combustibles creates a fire hazard. Findings on June 14, 2023: a. Room 115 - is currently being used to store decorations and activity supplies. Combustible materials are covering the floor with no clear path of egress. 3. 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 14, 2023: a. Room 113 - there are three bottles stored in a shallow plastic crate at the bathroom door without any means of restraint to prevent them from tipping or falling over. b. Room 111 - there is one unsecured bottle of oxygen on the floor.	C 166 <i>6/15/23</i> <i>6/23/23</i> <i>6/15/23</i> <i>6/15/23</i>	Was taken out of facility. Shelving was put into place for storage of decoration for activities. Company picked up. Company picked up.		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION	C 185			

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C 185	Continued From page 4 (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. Review of records revealed that the facility was not conducting quarterly fire rehearsals on each shift. Findings on June 14, 2023: a. There were no fire rehearsals on the second or third shift of the fourth quarter of 2022. b. There were no fire rehearsals on the second or third shift of the first quarter of 2023.	C 185	<i>6/15/23</i> Fire rehearsals are set up to be done on 1, 2, and 3rd shift each quarter.	
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:	C 189		

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C 189	Continued From page 5 1. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on June 14, 2023: a. 100 Hall Mechanical Room - the fire caulk around the conduit penetrations is loose and no longer sealing the penetration. There is an unsealed cable bundle penetration in the ceiling at the front corner of the room. b. Room 116 - the overhead light fixture was removed leaving a hole in the fire resistant rated ceiling. c. Room 111 - the heat detector is not secure and there is a gap around the base of the detector leaving a hole in the fire resistant rated ceiling. 2. Based on observation electrical equipment is not being maintained in safe operating condition. Missing or broken cover plates on electrical devices may cause injury to the occupants of the facility if wiring is exposed. Findings on June 14, 2023: a. Room 106 - the cover plate for the electrical outlet on the corridor wall is broken and the cover for the phone jack is off. 3. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not function properly during a fire. Findings on June 14, 2023:	C 189 <i>6/23/23</i> <i>6/23/23</i> <i>6/15/23</i> <i>6/14/23</i>	Fire caulking has been done in all openings. Fire caulking has been done in all openings. Fixed next day <i>Done</i>	

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C 189	Continued From page 6 a. Room 116 - tape was covering the heat detector while painting and had not been removed. The tape was removed at the time of survey. 4. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on June 14, 2023: a. Room 107 - the bathroom sink has air in the line and the faucet sputters and runs sporadically. 5. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops. Findings on June 14, 2023: a. Room 107 - there is a gap on the latch side of the corridor door ranging from about 1/4" to about 1/2" from the door hardware down. 6. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on June 14, 2023: a. Room 200 - the door does not close and latch. b. Room 210 - the door does not latch when closed. c. Room 217 - the door hardware is missing and therefore, cannot close and latch. 7. Based on observation there is a failure to	C 189 6/15/23 6/15/23 6/18/23 6/15/23	Removal Repaired / Replaced Maintenance man repaired. Fixed next day	

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C 189	Continued From page 7 maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have holes or gaps through the face of the door. Findings on June 14, 2023: a. Room 217 - there is a 2" diameter hole through the door where the door hardware was removed. b. Dining - there is a crescent shaped hole through the door at the deadbolt latch hardware. 8. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection. Findings on June 14, 2023: a. 200 Hall Exit - the exterior outlet outside the door does not trip when tested. 9. Based on observation there is a failure to install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping with a minimum 2" air gap could effect all occupants of the facility if the domestic water supply became contaminated. Findings on June 14, 2023: a. Kitchen - one of the icemaker drain lines in resting below the floor level in the floor drain. 10. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on June 14, 2023:	C 189 <i>6/17/23</i> <i>6/23/23</i> <i>6/15/23</i>	Maintenance repaired. Replaced Cut off above the drain.	

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C 189	Continued From page 8 a. The emergency light in the corridor outside of the kitchen did not illuminate on test.	C 189 <i>6/29/28</i>	Replaced	
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 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 14, 2023: a. Soiled Linen - the exhaust fan is not working.	C 199 <i>6/15/23</i>	Repaired / Replaced	