STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL049033	A. BUILDING: **01** B. WING _____	R **08/17/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MILL CREEK MANOR	**1902 ORA DRIVE** **STATESVILLE, NC 28625**

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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Ed Miller conducted on August 16, 2023. Deficiencies were cited that require a new Plan of Correction.	{C 000}		
{C 160}	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on August 17, 2023: c. There is a large pothole approximately 6' in diameter at the entrance to the facility. d. The dumpster vehicle has created large ruts in the pavement outside of the kitchen. Per Administrator the new owner is planning to repair these citations.	{C 160}		
{C 164}	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	{C 164}		

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{C 164}	Continued From page 1 (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 August 17, 2023: a. There was a pattern of exhaust fan grilles with heavy accumulations of dust. About a 1/3 of the grilles have been cleaned. d. Room 25 - the door veneer is damaged and broken off leaving rough edges at the latch side of the door and along the top and bottom of the door. e. Room 33 Bath - there are dark brown and gray stains on the floor around the base of the toilet and toward the walls. f. Kitchen - there are 6 to 8 broken floor tiles at the drain between the stove and the sinks. g. Room 25 - a section of the base on the left wall has fallen off exposing a hole at the base of the wall approximately 4" high and 18" long.	{C 164}		
{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	{C 166}		

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{C 166}	Continued From page 2 facilities. This Rule is not met as evidenced by: 1. 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 August 17, 2023: a. Room 5 - There was two bottles of oxygen unsecured on the floor and one bottle leaning over onto a pile of clothes in the closet.	{C 166}		
{C 185}	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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 did not have records of rehearsals of the fire plan quarterly on each shift. The records shall include the date and time of the rehearsals, the shift, staff	{C 185}		

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{C 185}	Continued From page 3 members present and a short description of what the rehearsal involved. Findings on August 17, 2023: a. Records of the fire rehearsals for 2023 and 2022 were not available for review. Interview with staff revealed that they were not aware of any fire drills being conducted since the previous staff member who conducted the drills left approximately six months ago.	{C 185}		
{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 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 or walls could allow fire and smoke to spread beyond the area of origin. Findings on August 17, 2023: a. Reception Area - there is a small unsealed penetration through the corridor wall where the MiFi cable was run. d. Kitchen - the caulk for the hood suppression system piping has fallen out leaving gaps around	{C 189}		

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{C 189}	Continued From page 4 the conduit penetrations in the ceiling. e. The escutcheon ring on the sprinkler head outside of Room 30 has dropped leaving a gap in the fire resistant rated ceiling. f. Basement Riser Room - the ceiling has water damage near the door running the length of the room. There are yellow water stains around the sheetrock joints. The finishing tape and paint is peeling off leaving the sheetrock joints exposed. New Findings on August 17, 2023: h. SCU Enclosed Porch - when the sprinkler escutcheon ring was secured to the ceiling, it reveled a hole beside the escutcheon ring. 2. 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 August 17, 2023: b. SCU Dining - the emergency light over the entry doors has one bulb working. d. SCU Living Area - the emergency light did not illuminate on test. 3. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on August 17, 2023: a. Dining - a serving cart prevented the door to the kitchen from closing quickly was still there.	{C 189}		

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{C 189}	Continued From page 5 5. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection. Kitchen hood suppression systems require 6 month inspections. Findings on August 17, 2023: a. The tag on the kitchen hood suppression system indicated that the hood was last inspected in November of 2021. 8. 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 August 17, 2023: a. Room 25 - there is a 1/2 inch gap between the top of the door and the door frame stop. New Finding 11. Based on observation, the building is not maintained in a safe and operating condition, by failing to ensure that egress from all areas can be accomplished without the use of keys, tools, or special knowledge, or effort. This could affect all if the exit cannot be opened trapping someone inside. Findings on August 17, 2023: a. Locked Courtyard- the gate is equipped with a hasp device on the outside. This device potentially could be used to lock the exit close.	{C 189}		

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{C 199}	Continued From page 6	{C 199}		
{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 August 17, 2023: a. Room 2 Bath - the exhaust fan is not working. b. Room 5 Bath - the exhaust fan is not working. c. B Hall Housekeeping - the exhaust fan is not working. d. Room 26 Bath - the exhaust fan is not working. Note: Staff is looking for replacment fans. 2. Based on observation the facility failed to provide exhaust ventilation in specified spaces. This could effect occupants of the facility if odors	{C 199}		

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{C 199}	Continued From page 7 were to permeate the facility's occupied areas beyond the Housekeeping Room. Findings on August 17, 2023: a. Housekeeping/Storage Closet at the end of the SCU Hall - a floor sink indicates this room was used for housekeeping and is currently used for storage. There is not an exhaust fan in this room. Note: Staff is looking for fan.	{C 199}		