

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL081010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/24/2023
NAME OF PROVIDER OR SUPPLIER HENDERSON CARE CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 125 HENDERSON CIRCLE FOREST CITY, NC 28043		
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on August 24, 2023. This facility was licensed on June 26, 1992 as a Home for the Aged and is currently licensed for 86 Beds. Therefore, this facility was surveyed for conformance with the 1991 Rules for Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and the 1991 (1992 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies have been cited and a Plan of Protection is required.	C 000		
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:	C 101		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 1. Observations revealed that the facility does not meet code requirements in effect at the time of construction, change in service or bed count, addition or renovation. Findings on August 24, 2023: a. B Hall - there is not an illuminated exit sign over the cross corridor doors indicating the direction of the exit path.	C 101		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have current fire and building safety inspection reports maintained in the home and available for review. Findings on August 24, 2023: a. Records indicate that the Fire Alarm Inspection was conducted on November 23, 2022 but there was not a copy of the inspection report available for review. b. The most current Fire Sprinkler System Inspection report was conducted in January of 2022. Interview with Staff revealed that they could not conduct the annual inspection until the compressor was replaced. The compressor has been replaced and the vendor has been notified.	C 111		

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C 134	Continued From page 2	C 134		
C 134	Bathrooms-Roll-in Shower SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (7) Each home shall have at least one bathroom opening off the corridor with: (A) a door of three feet minimum width; (B) a three feet by three feet roll-in shower designed to allow the staff to assist a resident in taking a shower without the staff getting wet; (C) a bathtub accessible on at least two sides; (D) a lavatory; and (E) a toilet. (8) If the tub and shower are in separate rooms, each room shall have a lavatory and a toilet; This Rule is not met as evidenced by: 1. Observations revealed that the facility does not meet the minimum bathroom requirements by not having at least one bathroom opening off the corridor with a bathtub accessible on at least two sides. Findings on August 24, 2023: a. The facility does not have a bathtub accessible on at least two sides in either of the Community Bathrooms.	C 134		
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;	C 164		

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C 164	Continued From page 3 (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 furniture was not in good repair. Findings on August 24, 2023: a. Nurse Station - two of the base cabinet drawer fronts have fallen off. 2. Observations revealed that the walls, ceilings, and floors were not kept clean and in good repair. Findings on August 24, 2023: a. Room A108 - there are several cracks in the popcorn ceiling finish and the finish is separating from the sheetrock. b. A leak occurred above the ceiling outside of Room B107. A 4' x 4' section of the ceiling has been replaced but not finished. There are large yellow water stains on the ceiling on either side of the patch. c. B118 Bath - the walls around the toilet are stained yellow and the vinyl base is curling and pulling away from the walls. The rest of the walls are splattered with small brown spots. d. Room B106 Bath - the walls around the toilet are dirty and the paint is flaking around the base. e. C Hall Soiled Linen - there are water stains on the ceiling at the wall/ceiling juncture and the popcorn finish is flaking off around the supply vent. f. C Hall Men's Shower Room - the popcorn ceiling finish is cracked and flaking. g. Kitchen - there is brown dirty residue on the emergency light, on the ceiling vents and on the	C 164		

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C 164	Continued From page 4 ceiling around the vents. h. Kitchen Pantry - the sheetrock ceiling is sagging in the back corner of the room. i. Kitchen - the ceiling at the back short hall exit is flaking and peeling and dirty around the supply vent.	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 facilities. This Rule is not met as evidenced by: 1. Observations revealed that the home was not free of all hazards. Findings on August 24, 2023: a. B118 Bath - one of the towel bars is broken leaving the sharp metal edges of the mounting bracket exposed. b. B106 Bath - the toilet paper dispenser is broken leaving the sharp metal edges of the mounting bracket exposed.	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	C 185		

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C 185	Continued From page 5 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 fire rehearsals quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. 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. Findings on August 24, 2023: a. Fire rehearsals have not been conducted since June 20, 2022. b. The record of rehearsals does not include a short description of what the rehearsal involved.	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.	C 189		

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C 189	Continued From page 6 This Rule is not met as evidenced by: - Based on observation the facility's fire safety equipment is not maintained in a safe and operating condition. Accelerators in the off position could indicate abnormal conditions and may delay the operation of the sprinkler system in the event of a fire. Findings on August 24, 2023: - Riser Room - the accelerator has been turned off. - Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on August 24, 2023: - A Hall - the cross corridor doors do not latch when closed. - B Hall - the right door of the cross corridor doors is rubbing and pulling the veneer off of the door. - Laundry Hall - the left door is not latching when released by the fire alarm. - Laundry (double doors) - the left door is not latching when closed and the right door is propped open with a clothes rack. - Activity Room - the right hand door is not latching when released by the fire alarm. - The left door on the double doors between Activity and Dining did not latch when released by the fire alarm. 3. Based on observation there is a failure to	C 189		

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C 189	Continued From page 7 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 August 24, 2023: a. Front Living Room - the supply grille in the back of the room is not secure to the ceiling. b. There is a gap around the sprinkler head outside of Storage by Room 102. c. Mechanical Room by 102 - there are two conduits where the fire caulk has been removed or fallen off. d. There is a 24" long gap between the ceiling and the top of the wall outside of Room A102. 4. Observations revealed that the electrical equipment is not maintained in a safe and operating condition. Findings on August 24, 2023: a. Room A106 Bath - the heat lamp bulb is missing leaving an opening in the ceiling and an open socket exposed. b. B Hall Exit - the protective cover for the exterior GFCI outlet has broken off leaving the outlet exposed to the elements. 5. Based on observation there is a failure to install and maintain required plumbing safety devices or equipment. Failure to maintain or install plumbing safety devices or equipment could effect all occupants of the facility if the absence of the plumbing safety devices or equipment caused the domestic water supply to become contaminated. Findings on August 24, 2023: a. Room A110 Bath - the shower wand extends	C 189		

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C 189	Continued From page 8 down to floor level within the tub and does not appear to have a vacuum breaker to prevent contaminated water from siphoning back up into the water supply. 6. Based on observation, the electrical equipment is not being maintained in a 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 August 24, 2023: a. Room A113 - one of the electrical outlets on the side wall is missing a cover plate. b. Room B101 - one of the electrical outlets at the window wall is missing a cover plate. 7. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain 18" clearance below the sprinkler heads creates an obstruction which limits the ability of the sprinkler system to suppress a fire. Findings on August 24, 2023: a. Clean Linen by A109 - PPE equipment and adult diapers are stored within 18" of the ceiling. b. Kitchen Pantry - there are boxes stacked within 18" of the ceiling. 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 holes or gaps within the face of the door. Findings on August 24, 2023: a. C Hall Men's Toilet - there are small holes through the door at the door hardware.	C 189		

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C 189	Continued From page 9 9. 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 August 24, 2023: a. Room C104 - the door does not latch when closed. 10. Observations revealed that the mechanical equipment is not maintained in a safe and operating condition. Findings on August 24, 2023: a. Kitchen - there is a heavy accumulation of grease on the interior panels of the hood suppression system.	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 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)	C 199		

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C 199	Continued From page 10 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 24, 2023: a. Room 102 Bath - the exhaust fan is not working. b. B Hall Janitor's Closet (by Room B109) - the exhaust fan is not working. c. B118 Bath - the exhaust fan is not working. d. B106 Bath - the exhaust fan is not working. e. Laundry Janitor's Closet - the exhaust fan is not working. f. Kitchen Janitor's Closet - the exhaust fan is not working.	C 199		