

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL049033	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 01/12/2024
NAME OF PROVIDER OR SUPPLIER MILL CREEK MANOR		STREET ADDRESS, CITY, STATE, ZIP CODE 1902 ORA DRIVE STATESVILLE, NC 28625		
(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 a Biennial Follow Up Construction Survey by Suzanna Fay conducted on January 12, 2024. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	{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 January 12, 2024: 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.	{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: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors;	{C 164}		

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

TITLE

(X6) DATE

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{C 164}	Continued From page 1 (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 January 12, 2024: e. Room 33 Bath - there are dark brown and gray stains on the floor around the base of the toilet and toward the walls. Interview with staff revealed that this has not been completed as it will require a new floor and the facility is in the process of changing owners. f. Kitchen - there are 6 to 8 broken floor tiles at the drain between the stove and the sinks. Interview with staff revealed that he has been unable to find tile to match the tile in the kitchen.	{C 164}		
{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.	{C 185}		

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{C 185}	Continued From page 2 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 members present and a short description of what the rehearsal involved. Findings on January 12, 2024: a. The fire rehearsal records from January 2023 through January 2024 were reviewed. Staff is conducting one fire drill each quarter on different shifts. Therefore there were not rehearsals on the first or third shift of the first quarter of 2023. There were not fire rehearsals on the first or second shift of the second quarter of 2023. There were not fire rehearsals conducted on the second or third shift of 2023 and there were not any fire rehearsals available for the fourth quarter of 2023.	{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	{C 189}		

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{C 189}	Continued From page 3 through fire resistant rated ceilings or walls could allow fire and smoke to spread beyond the area of origin. Findings on January 12, 2024: h. SCU Enclosed Porch - when the sprinkler escutcheon ring was secured to the ceiling, it reveled a hole beside the escutcheon ring.	{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) 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 January 12, 2024: a. Room 2 Bath - the exhaust fan is not working. Interview with staff revealed that he was unable to	{C 199}		

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{C 199}	Continued From page 4 repair the fans and is purchasing new ones. b. Room 5 Bath - the exhaust fan is not working. Interview with staff revealed that he was unable to repair the fans and is purchasing new ones. c. B Hall Housekeeping - the exhaust fan is not working. Interview with staff revealed that he was unable to repair the fans and is purchasing new ones. d. Room 26 Bath - the exhaust fan is not working. Interview with staff revealed that he was unable to repair the fans and is purchasing new ones. 2. Based on observation the facility failed to provide exhaust ventilation in specified spaces. This could effect occupants of the facility if odors were to permeate the facility's occupied areas beyond the Housekeeping Room. Findings on January 12, 2024: 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. The correction response revealed that the facility was no longer using this room as a housekeeping room. However, the facility is required to have one housekeeping closet per 60 residents. There is only one other Housekeeping closet in the facility.	{C 199}		