

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL008034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/04/2023
NAME OF PROVIDER OR SUPPLIER WINDSOR HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 336 SOUTH RHODES AVENUE WINDSOR, NC 27983		
(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 Construction Section Biennial Survey by Suzanna Fay conducted on October 4, 2023. Based on information gathered from our files, the Facility was first licensed on October 25, 2007 for Sixty (60) residents. Based on this information, we are requiring the facility to meet the 2005 Rules for the Licensing of Domiciliary Homes and the 2006 North Carolina State Building Code, Section 419- Institutional Occupancy. Deficiencies were cited that require a Plan of Correction.	C 000		
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 October 4, 2023: a. There was not a copy of the most current Fire Official's Inspection report available for review.	C 111		
C 154	Entrances/Exits-Wanderer Alarms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL	C 154		

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

TITLE

(X6) DATE

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C 154	Continued From page 1 ENVIRONMENT (h) The requirements for outside entrances and exits are: (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: 1. Observations revealed that the home has at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer and, therefore, is required to have each exit door accessible by residents equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. Findings on October 4, 2023: a. Dining - the alarm on the exit door did not sound when the door was opened. b. 300 Hall - the alarm on the door is damaged and does not sound when the door is opened.	C 154		
C 159	Laundry-Minimum One Res. Washer & Dryer SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (l) The requirements for laundry facilities are: (3) A minimum of one residential type washer	C 159		

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C 159	Continued From page 2 and dryer each shall be provided in a separate room which is accessible by staff, residents and family, even if all laundry services are contracted. This Rule is not met as evidenced by: 1. Observations revealed that there was not a minimum of one residential type washer and dryer provided in a separate room accessible by staff, residents and family. Findings on October 4, 2023: a. Beauty Salon/Residential Laundry - the residential type washer and dryer have been removed from this room and there are not any others available in the building.	C 159		
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 ceilings and floors are not kept clean and in good repair. Findings on October 4, 2023: a. Kitchen - a section of the ceiling finish over the dishwashing area has pulled away and is sagging.	C 164		

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C 164	Continued From page 3 b. Employee Lounge Toilet - there is a section of the rubber cove floor base that is falling off behind the toilet.	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 facility was not maintained free of all hazards. Loose toilet seats can cause an injury from a slip or fall. Findings on October 4, 2023: a. Women's Guest Toilet - the toilet seat is loose. 2. Observations revealed that the facility was not maintained free of all hazards. Broken accessories leave hard metal edges exposed that can cause injury by bruising or cutting. Findings on October 4, 2023: a. Room 215 Bath - the toilet paper dispenser is broken off the wall leaving the sharp metal edges of the mounting bracket exposed. b. Employee Lounge Toilet - the toilet paper dispenser is broken off the wall leaving the sharp metal edges of the mounting bracket exposed.	C 166		

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C 189	Continued From page 4	C 189		
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. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on October 4, 2023: a. 100 Hall Exit - the GFCI outside of the door has scorch marks around the sockets. b. Room 203 - the cover plate for the light switch is missing leaving the junction box exposed. 2. 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 October 4, 2023: a. Room 101 - the corridor door rubs on the frame requiring excessive force to close and latch. 3. Based on observation there is a failure to maintain the building's fire safety systems in a	C 189		

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C 189	Continued From page 5 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 October 4, 2023: a. Suite 210 Bath - the escutcheon ring has dropped on the sprinkler head leaving a gap in the fire resistant rated ceiling. This was corrected at the time of survey. b. Room 203 - the escutcheon ring on the back sprinkler head has dropped leaving a gap in the fire resistant rated ceiling. c. The escutcheon ring on the sprinkler head at the smoke barrier wall by Room 202 has dropped leaving a gap in the fire resistant rated ceiling. d. There is a small hole at the base of the exit sign outside of Room 301. e. Attic - there are unsealed 2" holes through the smoke barrier walls where new WiFi cable bundles were run. 4. 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 affect occupants of the facility if the equipment did not function to suppress a fire. Findings on October 4, 2023: a. Kitchen - the nozzles for the kitchen hood fire suppression system are directed at the shelf above the cooking equipment. 5. 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.	C 189		

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C 189	Continued From page 6 Findings on October 4, 2023: a. Kitchen - there is not a 2" air gap between the icemaker drain line and the floor drain.	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 October 4, 2023: a. There is a pattern of fans that are not working in the facility.	C 199		