TRE'MORE MANOR OF OXFORD

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FAX COVER PAGE

TO: Suzanna Fay FROM: Yolanda Mrgn

FAX #: 9197733-6592 # OF PAGES: _____

PHONE #: _____ DATE: __/__/____

RE: _____ CC: _____

☐ URGENT !!!! ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

COMMENTS: POC. Corrected.

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL039018	A. BUILDING: 01 B. WING _____	12/07/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRE' MORE MANOR ALF	6016 PINE TOWN ROAD OXFORD, NC 27565

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C 000	Initial Comments Report of a Biennial Construction Section Survey by Suzanna Fay conducted on December 7, 2023. This facility was licensed on January 1, 1965. This facility was closed prior to September 1993 and was re-licensed on March 29, 1995 for 31 Beds and had a name change. Therefore, this facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1958 and 1991 (1995 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1991 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of re-licensure. Deficiencies have been cited and a Plan of Correction is required.	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 December 7, 2023: a. The most recent Fire Alarm System inspection report available for review was conducted on	C 111	The facility fire inspectin, fire alarm system inspectin report has been scheduled and the report will be faxed and available for review upon inspectins.	ongoing

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C 111	Continued From page 1 January 31, 2022.	C 111		
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 requirements for bathrooms by not having a bathtub accessible on at least two sides. Findings on December 7, 2023: a. The facility was recently renovated. During the renovations the bathtub was removed and replaced with a shower.	C 134	The facility will replace the bathtub per the rule. The facility request grace with time to have the replacement work done.	
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	C 160		

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C 160	Continued From page 2 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 December 7, 2023: a. Back ramp - two of the spindles on the ramp are broken. b. Back corner of facility across from Barn 2 - it appears that a pest has entered the exterior soffit through a hole in the mesh soffit vent.	C 160	C160 The spindles have been removed and replaced. The back corner soffit has been repaired	2/6/24
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 are not in good repair. Findings on December 7, 2023: a. Men's Main Bathroom - the veneer on the door is delaminating along the bottom edge. b. Men's Hall Main Bathroom - the door frame is deteriorating along the bottom left side of the frame leaving a small hole that could cause injury	C 164	C164 A. The veneer has been repaired. B. The door frame has been repaired.	

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C 164	Continued From page 3 if someone caught their foot in the opening.	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. 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 December 7, 2023: a. There was not a fire rehearsal conducted on the second shift for the third quarter of 2023.	C 185	C185 All quarterly fire rehearsals have been conducted and are available for review.	12/23/23
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	C 189		

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C 189	Continued From page 4 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 facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be affected if doors do not completely close to help limit the spread of smoke or fire to the area of origin. Findings on December 7, 2023: a. The cross corridor doors did not close when released by the fire alarm. 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 December 7, 2023: a. The Dining Room door did not close and latch. 3. 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 December 7, 2023: a. Basement Stair - there are holes in the walls above the steps where the old air ducts were removed and new conduit has been run. b. Med Room - the cover plate on the ceiling junction box does not cover the opening in the	C 189	C189 ①Fire doors have been repaired and is operating correctly. 2/6/24 ②The dinning room door has been repaired. ③ All holes along the basement stairs have been repaired. - The cover on the junction plate has been repaired and the covering is closed. - med room door hardware has been repaired. - The hole in the laundry has been repaired. - The cracks in the laundry room around the exhaust has been repaired. - The two foot crack has been repaired. - The L shaped crack in the mens bathroom has been repaired. - holes under the exit sign has been repaired. - all heat detectors have been repaired and installed correctly	

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C 189	Continued From page 5 ceiling. c. Med Room - the door hardware does not cover the opening in the door. d. Laundry - there is a 1" hole and a 1/4" hole in the ceiling to the left of the heat detector. e. Laundry - there are cracks in the ceiling from the exhaust fan to the corridor wall. One of the cracks is separating creating a gap in the fire resistant rated ceiling. f. Men's Main Bathroom - there is a 2 foot long crack in the ceiling just outside the bathroom over the door. g. Men's Hall Second Bath - there is an L-shaped crack in the ceiling over the toilet. h. There are holes in the ceiling at the base of the exit sign by Room 14. 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 as intended during a fire. Findings on December 7, 2023: a. Laundry - the heat detector is not attached to its base. b. Bathroom by Room 25 - the heat detector is not secure to the ceiling. c. Room 20 - the heat detector is not secure to the ceiling.	C 189	- att	