STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034097	A. BUILDING: **01** B. WING _____	**04/09/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MAGNOLIA CREEK ASSISTED LIVING	**2560 WILLARD ROAD** **WINSTON SALEM, NC 27107**

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay conducted on April 9, 2024. Records indicate this facility was first licensed as a Home for the Aged on November 11, 1988. The facility is currently licensed for 117 beds including a 33 bed Special Care Unit. Therefore, the facility was surveyed using the 1987 Rules Homes For The Aged and Disabled and Minimum Standards and Regulations, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1978 North Carolina State Building Code. Deficiencies were cited and a Plan of Correction 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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Observations revealed that the facility does not meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. Electromagnetic locks shall have an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors in the facility. Release switches shall be located and properly identified at each nurses station serving the locked unit. An additional emergency release switch shall be provided for each locked door and located within 3 feet of the door. Findings on April 9, 2024: a. The AL Dining Room exit did not release with the central emergency release switches.	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 available for review. Findings on April 9, 2024: a. There was not a copy of the current Fire Sprinkler Inspection report available for review.	C 111		

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C 164	Continued From page 2	C 164		
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 furniture was not kept clean and in good repair. Findings on April 9, 2024: a. SCU Smoking Porch - all four of the rocking chairs have broken rockers creating a hazardous seating condition. b. SCU Spa - the chair by the sink has damaged legs making it unstable to sit on. 2. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair. Findings on April 9, 2024: a. SCU Dining - there are gouge marks on the walls around the perimeter of the room where the chair backs are scraping against the wall and there is one 2" diameter hole in the wall on the corridor side. b. Room 117 - the threshold at the bathroom door is loose creating a trip hazard. c. Room 105 Bath - the floor in front of the tub is stained gray where water is seeping under the vinyl flooring. d. There is a general pattern of exhaust fans with	C 164		

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C 164	Continued From page 3 heavy accumulations of dust on the grille. e. Corridor outside of AL Nurse Station - the popcorn finish is flaking off at the HVAC grille. f. AL Resident Bathroom - the tile grout in the shower and around the toilet is stained black. g. Room 234 Bath - the threshold is missing and the floor is beginning to curl creating a potential trip hazard. h. Corridor outside of Room 233 - there is a large indention in the wall below the rail and the wood base outside the room has soft spots and showing signs of moisture damage.	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. 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 April 9, 2024: a. There are oxygen bottles stored in shallow plastic trays without any means of restraint to prevent them from falling or tipping over.	C 166		

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C 185	Continued From page 4	C 185		
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 records of fire rehearsals did not include a short description of what the rehearsal involved. Findings on April 9, 2024: a. The fire rehearsal records did 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 5 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 April 9, 2024: a. Kitchen - the R/A grille over the service area is detaching and has a layer of dust. b. Kitchen Housekeeping - the exhaust fan grille is detaching leaving a gap in the fire resistant rated ceiling. c. Housekeeping Closet near SCU - there is a gap in the fire resistant rated ceiling at the sprinkler head. d. Storage near AL Nurse Station - the vent is loose leaving a gap in the fire resistant rated ceiling. e. Exit by Activity Room - there is a hole in the wall where the wiring for the maglock controls are run. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on April 9, 2024: a. The emergency light/exit sign inside the SCU entrance detached from the base when attempting to test the unit. The light did not illuminate when tested. 3. Observations revealed that the plumbing	C 189		

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C 189	Continued From page 6 equipment was not maintained in a safe and operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility. Findings on April 9, 2024: a. Nurse Station Toilet - the toilet is not secure to the floor. 4. 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 through the surface of the door or between the door and the door frame stops. Findings on April 9, 2024: a. Room 101 - the door hardware is loose leaving gaps in the face of the door. b. Room 238 - the door is damaged at the hardware leaving openings between the door and the door frame. 5. 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 April 9, 2024: a. Room 216 - the door does not latch when closed. b. Room 234 - the hinges are loose causing the door to drag on the floor and requiring excessive force to close. c. Room 239 - the latch is loose and the door does not latch when closed.	C 189		

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C 199	Continued From page 7	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 April 9, 2024: a. Employee Restroom (right side) - the exhaust fan is not working.	C 199		