

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032132	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/12/2024
NAME OF PROVIDER OR SUPPLIER CAROLINA RESERVE OF DURHAM		STREET ADDRESS, CITY, STATE, ZIP CODE 4523 HOPE VALLEY ROAD DURHAM, NC 27707		
(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 June 12, 2024. This facility was first licensed on October 6, 1995 as a HA. This facility is currently licensed for 60 Beds. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1991 (1995 Revision) Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1994 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies have been 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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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Observations revealed that the facility is not in compliance with code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. For licensed facilities equipped with special locking, for any required emergency release switch that is of the locking type, all staff that are responsible for the evacuation of the occupants of the locked unit must carry emergency release switch keys. Findings on June 12, 2024: a. SCU - interview with three staff members revealed that they did not carry an emergency release switch key on them. The Med Tech retrieved her keys but did not know which key was for the emergency release switch.	C 101		
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 grounds were not maintained in a clean and safe condition. Findings on June 12, 2024: a. Exit by Room 114 - a section of the exterior soffit at the corner has bowed and is hanging loose from the soffit leaving an opening for pests	C 160		

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C 160	Continued From page 2 to enter the facility. b. A section of the corner fascia trim outside of the 300 Hall is rotting and deteriorating.	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; (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 were not kept in good repair. Findings on June 12, 2024: a. Room 212 - the door hardware is loose. b. Kitchen - the FRP panel behind the cooking unit is detaching from the wall.	C 164		
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 3 This Rule is not met as evidenced by: 1. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Broken and missing dryer exhaust caps allows for pests to enter the facility through the exhaust openings. Findings on June 12, 2024: a. Exterior of Laundry - one of the dryer exhaust caps had fallen off and the other was heavily damaged. 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 June 12, 2024: a. Front Living Room - the doors are held open with magnetic devices. The doors are not synchronized so that the door with the astragal closes first; so that when the doors were released on the fire alarm, they did not close and latch. b. Room 109 - the corridor door is rubbing at the top of the frame requiring excessive force to close and latch. c. 200 Hall Residential Laundry - the door hardware is loose and the right hand door is not closing. d. Room 306 - the corridor door is rubbing on the frame, making it difficult to open and is pulling the door veneer loose. e. Room 314 - the corridor door is rubbing on the frame, making it difficult to open and causing the door veneer to pull loose.	C 189		

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C 189	Continued From page 4 3. 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 June 12, 2024: a. The exit sign by Room 113 did not illuminate on test. 4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on June 12, 2024: a. SCU Dining Area - the left bulb on the emergency light is burned out and did not illuminate when tested. 5. 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 could allow fire and smoke to spread beyond the area of origin. Findings on June 12, 2024: a. 100 Hall Spa - the sprinkler head is missing its escutcheon ring. b. 200 Hall - the attic access panel near the Activity Room is not secure leaving an opening in the fire resistant rated ceiling. c. Laundry - there are cracks in the ceiling around the sprinkler drain access panel. d. SCU - the sprinkler head just outside the Living Area is missing its escutcheon ring.	C 189		

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C 189	Continued From page 5 6. Observations revealed that the plumbing equipment was not maintained in operating condition. Findings on June 12, 2024: a. SCU Dining - there is a steady stream of water coming out of the sink faucet.	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 June 12, 2024: a. 100 Hall - there is a pattern of resident bathroom exhaust fans not working.	C 199		

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C 199	Continued From page 6 b. Laundry - the exhaust fan in the Main Laundry area and in Housekeeping are not working. 2. Based on observation there is not an exhaust ventilation in a space required to have exhaust ventilation. This could affect the occupants of the facility if heat, humidity, odors, fumes or possible air borne contaminants were not exhausted from the building. Findings on June 12, 2024: a. 200 Hall Residential Laundry - there is no mechanical exhaust provided for this space.	C 199		