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
	HAL029010	A. BUILDING: **01** B. WING _____	**08/14/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRAYSON CREEK OF WELCOME	**6781 OLD US HWY 52** **LEXINGTON, NC 27295**

(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 Tod Hancock conducted on August 14, 2022. This facility was licensed on September 9, 2013, and is currently licensed for 75 Beds including a 16 Bed Special Care Unit. Therefore, the 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 2009 Edition of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies have been cited and a Plan of Correction is required.	C 000	Response to cited deficiencies do not constitute and admission or agreement by the facility of the truth of facts alleged or the conclusions set forth in the corrective action report; the plan of correction is prepared solely as a matter of compliance with State Law.	
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.Based on an interview with the Executive Director the facility failed to maintain in the facility, current (completed within the last twelve months) sanitation and fire and building safety inspection reports available for review. Findings on August 14, 2024: a. There was no Fire Official (Fire Marshal) report available for review. b. There was no National Fire Alarm and Signaling Code (NFPA 72) report available for review. c. There was no Standard for the Inspection,	C 111	The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review per rule area 10A NCAC 13F .0302. The Fire Marshal Inspection was completed 8/15/2024 with no violations found. The National Fire Alarm Inspection was completed 10/17/2023. A subsequent annual inspection is in the process of being scheduled with Patriot Systems, LLC. Twin City Sprinkler has been contacted to schedule an annual sprinkler inspection.	9/20/24

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C 111	Continued From page 1 Testing, and Maintenance of Water-Base Fire Protection System (NFPA 25) report available for review.	C 111		
C 155	Floors-Non-skid, in Good Repair SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (i) The requirements for floors are: (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable; (2) Scatter or throw rugs shall not be used; and (3) All floors shall be kept in good repair. This Rule is not met as evidenced by: 1. Based on observation the facility is maintain the floors in good repair. Findings on August 14, 2024: a.400 Hall-Spa- There are ceramic tiles missing in the roll -in shower stall.	C 155	The facility shall ensure all flooring within the building are maintained and in good repair as stated in rule area 10A NCAC 13F .0305. The tiles in the 400 hall-spa room were ordered on 8/19/2024 and replaced following delivery. The maintenance director is to complete monthly rounds to ensure flooring is maintained and in good repair.	9/3/24
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:	C 189		

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C 189	Continued From page 2 1. Based on observation, the building was not maintained in a safe and operating condition, by failing to ensure that egress from all areas can be accomplished without the use of keys, tools, special knowledge, or effort. This could affect all if the exit cannot be opened trapping someone inside. Findings on August 14, 2024: a. Kitchen - The walk-in freezers, have an inside door releasing device that turns the outside catch unlocking the door. The inside releasing device should be accessible and operable.	C 189	The facility shall ensure egress from all areas that can be accomplished without the use of keys, tools, special knowledge, or effort as stated in rule area 10A NCAC 13F .0311. Upon investigation, the inside releasing devices within the walk-in cooler and freezer are functioning properly, however, were obstructed by boxes in the walk-in freezer. The boxes have been removed to allow the releasing devices to be accessible without moving items.	8/20/24