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	HAL039016	A. BUILDING: **01** B. WING _____	**10/30/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DUNMORE SENIOR LIVING OF OXFORD	**200 COVENTRY DRIVE OXFORD, NC 27565**

(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 Biennial Construction Survey by Suzanna Fay conducted on October 30, 2024. This facility was licensed on November 26, 1997 and is currently licensed for 60 Beds with a 14 Bed Special Care Unit. 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 1996 Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 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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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 October 30, 2024: a. There is not an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors on the AL side of the facility.	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 sanitation and fire and building safety inspection reports maintained in the home and available for review. Findings on October 30, 2024:	C 111		

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C 111	Continued From page 2 a. The most recent Building Sanitation Inspection Report was dated January 11, 2022. b. The most recent Kitchen Sanitation Inspection Report was dated January 11, 2022. c. There was not a current record of the Fire Alarm System Inspection Report.	C 111		
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 premises were not maintained in a clean condition. Findings on October 30, 2024: a. 200 Hall Porch - the ceiling finish is splitting and peeling in numerous locations. Note: the facility is currently undergoing renovations that includes painting of the porches. b. 300 Hall Porch - the ceiling finish is splitting and peeling in numerous locations. Note: the facility is currently undergoing renovations that includes painting of the porches.	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:	C 164		

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C 164	Continued From page 3 (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 furnishings were not kept in good repair. Findings on October 30, 2024: a. Beauty Salon - the base on the sink cabinet is coming loose. b. Women's Guest Bathroom - the toilet paper dispenser is falling off of the wall. 2. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair. Findings on October 30, 2024: a. Guest Toilets - there is a heavy accumulation of dust on the exhaust fan grilles in both bathrooms. b. Room 309 - there are small gray mildew spots on the walls and ceilings to the right of the toilet. The shower seat is covered in small black mildew spots. The floor at the far wall has blackish stains seeping under the vinyl. There are also mildew spots on the wall of the bedroom at the bathroom door. c. Residential Laundry - there is a build up of lint inside the roof top dryer exhaust as well as on the roof around the vent creating a fire hazard. d. Kitchen Dry Storage - there is a black spot of microbial growth at the exterior wall. e. Kitchen Dry Storage - there is a pile of cereal or some type of grain spilled on the floor under the shelving.	C 164		

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C 164	Continued From page 4 f. Kitchen Housekeeping - the floor behind the door is covered with debris, dirt and dead insects. g. 500 Hall Janitor's Closet - there is a 12" long black stain of microbial growth at the back 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. This Rule is not met as evidenced by: 1. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be affected if the equipment failed to alert the occupants in case of a fire. Findings on October 30, 2024: a. The fire alarm panel is indicating trouble on the system due to a damaged smoke detector in Room 403. 2. Based on observation the facility's fire safety equipment is not maintained in a safe and operating condition. Accelerators in the off position could indicate abnormal conditions and may delay the operation of the sprinkler system in the event of a fire.	C 189		

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C 189	Continued From page 5 Findings on October 30, 2024: a. The gauge on the accelerator is at zero pressure indicating that the accelerator has been turned off. 3. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection. Findings on October 30, 2024: a. Room 204 Bathroom - the GFCI outlet at the sink did not trip when tested. 4. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating due to sprinkler heads being obstructed with cobwebs, lint and dust could affect occupants in the fire compartment if the sprinkler head could not suppress a fire. Findings on October 30, 2024: a. 200 Hall Porch - spider webs are wrapping the sprinkler heads. b. Room 205 - there are spider webs wrapping the sprinkler head. c. Room 309 - the bedroom sprinkler head is covered in spider webs. 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 October 30, 2024: a. The escutcheon ring is missing from the	C 189		

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C 189	Continued From page 6 sprinkler head at the 200 Hall exit. b. Supply Closet - there is an unsealed cable penetration in the back left corner. c. Nurses Station - there is an unsealed cable penetration to the right of the fire alarm control panel. d. 400 Hall Laundry - there is a 2" diameter hole in the ceiling over the utility sink. 6. 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 30, 2024: a. Room 207 - the latch is jammed and does not extend into the latch plate preventing the door from latching. b. Room 303 - the door is rubbing at the top right of the door frame requiring excessive force to close and latch. c. Kitchen Housekeeping - the frame is separating at the top left corner and the door does not close and latch. d. Room 403 - the door rubs on the top of the frame and required excessive force to close and latch. e. SCU Storage Room - the door is rubbing on the frame making is difficult to close and causing the veneer to pull away from the face of the door. 7. 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.	C 189		

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C 189	Continued From page 7 Findings on October 30, 2024: a. Hopper Room - the emergency light did not illuminate on test. b. SCU - the exit sign by Room 505 did not illuminate on test. 8. Based on observation, the electrical equipment is not being maintained in a safe operating condition. Missing, loose or broken cover plates on electrical devices may cause injury to the occupants of the facility if wiring is exposed. Findings on October 30, 2024: a. 200 Hall Community Bath - the bottom screw on the cover plate of the electrical outlet at the sink is missing making the cover plate not secure. b. Laundry - the electrical box for the dryer is pulling out of the wall. 9. Observations revealed that the plumbing equipment is not maintained in a safe and operating condition. Loose toilet seats can cause an injury from a slip or fall. Findings on October 30, 2024: a. Women's Guest Toilet - the toilet seat is not secure and moves easily.	C 189		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall	C 195		

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C 195	Continued From page 8 be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 and testing revealed that the hot water temperature was not maintained between 100 and 116 degrees F at all fixtures used by residents. Findings on October 30, 2024: a. AL side - the water temperature in the Community Bath was 96 degrees F. b. SCU - the water temperature taken at the Staff Bathroom and in the Med Room was 138 degrees F. The temperature was adjusted and the water in the Med Room was left on to run and the plumbing contractor was contacted.	C 195		
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.	C 199		

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C 199	Continued From page 9 (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 30, 2024: a. Hopper Room - the fan is not working. b. 500 Hall Janitor's Closet - the exhaust fan is not working.	C 199		