| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL034069 | A. BUILDING: **01**<br>B. WING _____ | **09/03/2024** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **THE BRADFORD VILLAGE OF KERNERSVILLE - WEST** | **602 PINEY GROVE ROAD KERNERSVILLE, NC 27284** |

| (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<br><br>Report of a Construction Section Biennial Survey by Tod Hancock, conducted on September 3, 2024.<br><br>Records indicate this facility was licensed as a Home for the Aged in 1965 with an addition completed in 1972. The facility is currently licensed for Sixty-Two (62) Beds. Based on the this information, the facility is required to meet the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1967 North Carolina State Building Code - Institutional Occupancy.<br><br>Deficiencies were cited that require a Plan of Correction | C 000 | Initial Comments | |
| C 111 | Must Have Current San. & Fire Safety Reports<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(<br>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.<br><br>This Rule is not met as evidenced by:<br>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.<br>Findings on September 3, 2024:<br><br>a. There was no Fire Official (Fire Marshal) report available for review. | C 111 | Must Have Current San & Fire Safety Report<br><br>SECTION .0300 NCAC 13F .0302 DESIGN AND CONSTRUCTION<br><br>a. The community Adminstrator contacted the Town of Kernersville Assistant Fire Inspector by phone. The Fire Inspector pulled their records and sent the report from the Fire Inspection completed December 13, 2023. The report is now on file and available for review.<br><br>The Administrator will maintain the responsibility of ensuring all sanitation and fire and building inspection reports are current and available for review. | 10/31/2024 |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL034069 | A. BUILDING: **01**<br>B. WING _____ | **09/03/2024** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **THE BRADFORD VILLAGE OF KERNERSVILLE** | **602 PINEY GROVE ROAD KERNERSVILLE, NC 27284** |

| (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 162 | Continued From page 1 | C 162 | | |
| C 162 | Outside Premises-Outdoor Lighting<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT<br>(m) The requirements for outside premises are:<br>(3) Outdoor walkways and drives shall be illuminated by no less than five foot-candles of light at ground level.<br><br>This Rule is not met as evidenced by:<br>1.Based on observation, the outdoor lighting of the walkways and drives did not have five-foot candles of illumination at ground level. This could affect all residents, staff, and visitors if walkways and drives are not properly illuminated, warning of tripping hazards or obstructions.<br>Findings on September 3, 2024:<br><br>a. Hall B-Left Side Door--There was no illumination of the landing and walkway. | C 162 | Outside Premises - Outdoor Lighting<br><br>SECTION .0300 - Physical Plant 10A NCAC 13F .0305 Physical Environment<br><br>a. Hall B - Left side door - A light has been installed to illuminate the landing and walkway. | 10/31/2024 |
| C 188 | Electrical Outlets in Wet Locations<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0310 ELECTRICAL OUTLETS<br>All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation the facility is not maintaining the electrical components located near a water source in a safe manner.<br>Findings on September 3, 2024:<br><br>a. Salon- The receptacle adjacent to the lavatory did not trip on test indicating the lack of ground | C 188 | Electrical Outlets in Wet Locations<br><br>SECTION .0300 - Physical Plant<br>10A NCAN 13F .0310 Electrical Outlets<br><br>a. Salon - The receptacle adjacent to the lavatory has been replaced with a GCFI outlet to provide ground fault protection. | 10/31/2024 |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL034069 | A. BUILDING: **01**<br>B. WING _____ | **09/03/2024** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **THE BRADFORD VILLAGE OF KERNERSVILLE** | **602 PINEY GROVE ROAD KERNERSVILLE, NC 27284** |

| (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 188 | Continued From page 2<br>fault protection. | C 188 | | |
| C 189 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation the facility failed to maintain its plumbing system in a safe and operating manner.<br>Findings on September 3, 2024:<br><br>a.Front Hall- Group Bathroom B- The shower is not in an operational condition.<br>b.Back Hall -Group Bathroom A- The shower is not in an operational condition. | C 189 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAN 13F .0311 OTHER REQUIREMENTS<br><br>The Administrator has contacted a General Contractor with Triad Home Improvement to research the plumbing issue and procure a vendor to make the needed repairs to the<br><br>a. Front Hall Shower in bathroom B and the<br>b. Back Hall Shower in Bathroom A.<br><br>The facility still has adequate showers and tubs to ensure all residents can get personal care while the 2 showers are repaired. | TBD |
| C 202 | Existing Fac. Housing Non-ambs-Hand Bells<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(j) Except where otherwise specified, existing facilities housing persons unable to evacuate without staff assistance shall provide those residents with hand bells or other signaling devices.<br>(k) This Rule shall apply to new and existing | C 202 | Existing Fac. Housing Non-ambs - Handbells<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS | 10/31/2024 |

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL034069 | A. BUILDING: **01**<br>B. WING _____ | **09/03/2024** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **THE BRADFORD VILLAGE OF KERNERSVILLE** | **602 PINEY GROVE ROAD KERNERSVILLE, NC 27284** |

| (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 202 | Continued From page 3<br>facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on Observation and interviews with Staff, the facility failed to maintain the call system in a safe and operating condition.<br>Findings on September 3, 2024:<br><br>a. Throughout the facility- The facility has an electrically operated call system with a call station located at each bed connecting each resident bedroom to a staff station. The system also activates a light above each bedroom door. Call system light bulbs, above the doors, were missing. | C 202 | Continued From page 3<br><br>a. Call system light bulbs, above the doors, have been installed<br>.<br>The Maintenance Technician will maintain the responsibility to ensure all bulbs are in place during a weekly walk through of the community.<br><br>In the absence of the Maintenance Technician, the Administrator or someone assigned the task by the Administrator will ensure all bulbs are in place on a weekly walk through. | 11/9/2024 |