

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL021009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/21/2015
NAME OF PROVIDER OR SUPPLIER EDENTON HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 323 MEDICAL ARTS DRIVE EDENTON, NC 27932		
(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 Ed Miller and Frank Strickland on January 21, 2015. Records indicate this facility was first licensed or submitted on June 28, 2007 as a Home for the Aged (HA) housing sixty beds. Therefore, the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, applicable portions of the 2002 Edition of the North Carolina Building Code(s), Section 407 - Group I2. Physical plant deficiencies were noted which require a plan of correction.	C 000		
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not proving single hand motion door hardware at exits. This would affect all residents, staff and visitors by requiring more time to exit the building during an emergency. Findings on January 21, 2015: a. The exterior Kitchen door replacement door knob took multiple hand motion to operate the	C 153		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 153	Continued From page 1 door.	C 153		
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. Based on Observation, the facility failed to provide an environment in accordance with this Rule. This would affect all residents, staff and visitors by exposing them to unsanitary conditions and dirty components. Findings: on January 21, 2015: a. The return HVAC grilles, exhaust fans and their radiation dampers have an excessive accumulation of dust/lint in the following locations to include but not limited to: i. Day Room, ii. Bedroom 118, iii. Corridor intersection at Nurse Station, iv. Men Toilet Room near Bedroom 201 v. Women Toilet Room near Bedroom 201 b. The Beauty Shop vacuum breaker was torn apart being repaired.	C 164		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge)	C 183		

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C 183	Continued From page 2 A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide an environment in accordance with this Rule. This could affect all residents, staff and visitors by not having emergency equipment in proper working order. Findings on January 21, 2015 a. On the Laundry Hall, the portable fire extinguisher maintenance tag indicated that the annual maintenance had expired on May 2014.	C 183		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to maintain in a safe manner, the electrical power receptacles in wet areas. This would affect all residents, staff and visitors by not providing ground fault protection to these devices. Findings on January 21, 2015: a. The ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power and could not be tested for ground faults at the following locations to include but not limited to: i. Screen porch near Bedroom 214.	C 188		

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C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the Building was not maintain in a proper operating manner by failing to ensure that the emergency equipment works to NC State Building Code. This could affect all residents, staff and visitors if the egress pathways were not illuminated in an emergency. Findings on January 21 2015:</p> <p>a. Wall-mounted emergency light(s) did not work on backup power when the test button was pushed in the following locations to include but not limited to:</p> <p>i. Corridor near bedroom 118/110. ii. Corridor near bedroom 207/209. iii. Private Dining. iv. Corridor near bedroom 118/110. v. Laundry Hall.</p> <p>2. Based on observation, the building was not maintained in a safe manner by failing to ensure that the all corridor doors are smoke resisting, as required by Code. This could affect all residents, staff and visitors by not containing smoke and fire in the room of origin Findings on January 21, 2015:</p> <p>i. The Dutch door at the Nurses Station did not have a smoke tight seal between the two leafs.</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>3. Based on observations, the Building was not maintained in a safe manner because of breaches through the fire-resistance-rated construction invalidates its integrity. This could affect all residents, staff and visitors if smoke/fire is not contained in Room or Compartment of origin. Findings on January 21, 2015: a. In the Kitchen Mechanical Closet the fire collar had falling down from its proper location at the ceiling protection the PVC vent pipes. b. Dryer Vent Room there were gaps ranging from 1/8 to 3/8 inches around the gas pipe penetrating through the ceiling assembly.</p> <p>4. Based on observation, the building was not maintained in a safe manner by failing to ensure that clothes dryer duct is not damaged. This could affect all residents, staff and visitors by allowing lint to accumulate (fuel for a fire) Findings on January 21, 2015: a. The clothes dryer transition duct was crushed and had holes in it.</p> <p>5. Based on Observation, the Building was not maintain in a safe manner, some corridor doors were held open by devices that do not release with a push or pull of the door. This could affect all residents, staff and visitors by not containing smoke and fire in the room of origin. Findings on January 21, 2015: a. Corridor door to the Laundry was wedged open.</p> <p>6. Based on Observation, the facility was not maintained in a safe manner by having fire rated doors that did not close completely in order to contain smoke and fire. This could affect all residents, staff and visitors by not containing</p>	C 189		

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C 189	Continued From page 5 smoke and fire in the fire compartment of origin. Findings on January 21, 2015 a. The left leaf of the 300 Hall cross-corridor doors did not latch when activated by the fire alarm system.	C 189		