

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL081061	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/11/2016
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NAME OF PROVIDER OR SUPPLIER NANAS ASSISTED LIVING FACILITY # 2	STREET ADDRESS, CITY, STATE, ZIP CODE 2270 OAKLAND ROAD FOREST CITY, NC 28043
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(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
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C 000 Initial Comments

Report of Biennial Construction Survey by Dennis Harrell on 2-11-2016.

Records indicate that this facility was first licensed on 6-1-1968, for 44 residents. Based on this information, we are requiring the facility to meet the 1967 Edition of the North Carolina State Building Code, the 1971 Rules for the Licensing of Adult Care Homes, and the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds.

C 000

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:
Based on a review of documents, the required annual fire alarm system inspection report could not be located. Fire alarm systems that are not inspected and approved as required could result in the fire alarm system not operating properly in the event of an actual fire.

C 111

C 133 Bathrooms-Hand Grips

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F .0305 PHYSICAL ENVIRONMENT
(e) The requirements for bathrooms and toilet rooms are:
(6) Hand grips shall be installed at all

C 133

Hand Grips will be installed at the toilets

4/30/16

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Alena Peppy TITLE: Adm DATE: 3/14/2016

Division of Health Service Regulation

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NANAS ASSISTED LIVING FACILITY # 2

STREET ADDRESS, CITY, STATE, ZIP CODE

2270 OAKLAND ROAD
FOREST CITY, NC 28043

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C 133	Continued From page 1 commodos, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Based on observation, there was no hand grip provided at the toilet or tub in the shower room on the women's hall. 2. Based on observation, there was no hand grip provided at the toilet in the bathroom room on the women's hall.	C 133	and tubs in the shower room on the women's hall and bath room on women hall.	4/30/16
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the exit door near room 1 will not latch to prevent unauthorized entry. Exits that cannot latch endanger the security of the residents and staff. 2. Based on observation, the exit door at the front of the dining room will not latch properly because the latch strike is missing. 3. Based on observation, the glass globe is broken on a wall sconce in the corridor near the women's shower. The broken globe presents sharp edges that are a laceration risk.	C 166	Latch has been install on the exit door near room 1. Latch strike has been install, the exit door at the front of the dining room.	4/30/16 4/30/16

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C 166	Continued From page 2 4. Based on observation, the kick plate on the door to the office was badly bent presenting a laceration hazard. 5. Based on observation, there was exposed electrical wiring in the closet off room 15. Exposed wiring could be a hazard to the resident. 6. Based on observation, the exterior exit paths were not maintained uncluttered and free of obstructions. Findings include: a. The gate across the sidewalk in front of the exit from the dining room would not open for egress. b. The exit ramp at the rear of the facility was obstructed with 3 chairs. 7. Based on observation, the hose on the shower wand in the Beauty Salon was long enough to reach the sink basin and there was no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixture present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed. 8. Based on observation there was a hasp and padlock on the outside of the door to the freezer room. Latching hardware that can only be operated from one side of the door, such as hasps and padlocks, present the possibility that someone could be trapped in the room. 9. Based on observation, waste traps had been allowed to become dry. Dry waste traps allow noxious, combustible odors and possibly harmful bacteria to enter the facility. Findings include: a. The sink trap was dry in the janitor's closet,	C 166	Broken globe was removed and a new one was installed. Kick plate was removed on office door and a new one was installed. Room 15 all wire has been fixed so it will not expose any electrical wiring in the closet in room 15. The gate has been repaired & working. Chairs have been removed from exit ramp. Vacuum Breaker was installed. Door will be removed.	4/30/16 4/30/16 4/30/16 4/30/16 4/30/16

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STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

HA1081051

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: 01

B. WING: _____

(X3) DATE SURVEY
COMPLETED

02/11/2016

NAME OF PROVIDER OR SUPPLIER

NANAS ASSISTED LIVING FACILITY # 2

STREET ADDRESS, CITY, STATE, ZIP CODE

2270 OAKLAND ROAD
FOREST CITY, NC 28043(X4) ID
PREFIX
TAGSUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL
REGULATORY OR LSC IDENTIFYING INFORMATION)ID
PREFIX
TAGPROVIDER'S PLAN OF CORRECTION
(EACH CORRECTIVE ACTION SHOULD BE
CROSS-REFERENCED TO THE APPROPRIATE
DEFICIENCY)(X5)
COMPLETE
DATEC 188 Continued From page 3
b. The hopper trap was dry in the janitor's closet.

C 188

C 189 Building Equipment Maintained Safe, Operating

C 189

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, the fire alarm system
was intermittently showing a "Trouble" condition.
Fire alarms in "Trouble" may fail to operate
properly when needed.2. Based on observation the required one-hour
fire rated walls and/or ceilings were compromised
in several locations. Holes and penetrations that
are not sealed with materials approved for use in
one-hour fire rated construction present the
possibility that a fire that begins in one space can
quickly spread to other areas of the facility.
Findings include:

- a. Hole in the wall and ceiling of the office,
- b. Hole in the ceiling of the nurse station,
- c. Gap where the wall meets the ceiling in the
closets off at least rooms 9, 10, 11, 13 and 15.
This condition was a pattern in most of the
closets inspected.
- d. Plumbing access door, 20 inches by 36
inches, made of combustible material in shower
room on the women's hall.

Fire Alarm was
repaired and
working 4/30/16

Hole was repaired
in ceiling and office 4/30/16

Hole repaired in ceiling
at nurse station
Gap have been
repaired in room
9, 10, 11, 13 and 15 4/30/16

Plumbing door has
been repaired. 4/30/16

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C 189	Continued From page 4 e. Plywood patch, 16 inches by 24 inches, on the ceiling in the linen closet. f. The attic access door in the clean linen room is damaged. g. Hole in the kitchen ceiling. h. Holes in the ceiling of the freezer room. 3. Based on observation, the sampling tube for the duct mounted smoke detector in the attic was very dirty. Sampling tubes that are not periodically inspected and cleaned can endanger all residents and staff because the duct detector may fail to operate properly. 4. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include: a. The closer was damaged on the ¾ hour fire rated door to the laundry chute closet. This fire rated door must be self-closing and must automatically latch when closed. b. The doors to the office and the nurse station were equipped with only a dead-bolt latch. Dead-bolts cannot automatically latch to contain a fire and smoke. c. The door to bedroom 27 was hard to close and latch. d. The latchbolt was missing on the door to shower room 18. e. The door to bedroom 19 was propped open. f. The door to the shower on the women's hall is dragging the floor and hard to close. g. The latchset is missing on the door to the closet off the corridor to the dining room. h. The door to the clean linen closet of the	C 189	Door has been repaired Hole repaired in the Kitchen 4/30/16 Hole repaired in the Freezer room 4/30/16 Sampling tubes have been cleaned. Fire door has been repaired 4/30/16 The office door and nurse station the latch is repaired 4/30/16 Bedroom door 27 is repaired 4/30/16 Latch bolt has been installed on the Shower room 18. 4/30/16 Bedroom 19 door is fixed 4/30/16 Door on women hall is repaired. Latch set have been replaced on door	4/30/16

Division of Health Service Regulation

STATE FORM

NEW

JIME21

If continuation sheet 5 of 7

Division of Health Service Regulation

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C 189	Continued From page 5 corridor to the dining room will not close and latch. i. The door to the bathroom on the women's hall does not fit the opening properly to be resistant to the passage of smoke. j. There is no door stop provided for the door to bedroom 4. 5. Based on observation, the attic draft stop door was left open in the front portion of the attic. Draft stops cannot function when the doors are left open. 6. Based on observation, a receptacle plate was missing in room 10. Missing electrical plates expose energized wires and parts. 7. Based on observation, the attic access door in the clean linen room is a disappearing stairway modified to be fire resistant. The hinges on the stair ladder are damaged and could be a fall hazard. 8. Based on observation, the soffit at the rear of the facility above the basement door was deteriorated and missing. Openings in soffit allow birds and other noxious pests to enter the attic.	C 189	Clean line closet door has been repair and latch set on Door stop was provided for bedroom # 4 The attic door has been closed. Receptacle plate was replace in room 10 Hinges have been repaired. Base ment door was repaired	4/30/16 4/30/16 4/30/16 4/30/16 4/30/16
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and	C 191	Heater have been removed	4/30/16

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C 101	Continued From page 6 portable electric heaters are prohibited. (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: Based on observation the facility failed to adhere to the prohibition of portable electric heaters. Portable electric heaters are a potential fire hazard and as such could effect all occupants of the facility. Findings include: a. There was a wall mount type electric baseboard heater in use in the office as a portable electric heater. b. This heater was not mounted to the wall and was wired improperly using 2 wire extension cord. c. The same heater was not equipped with a thermostat.	C 101	Heater was removed.	4/30/16