

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL093005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 07/13/2016
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NAME OF PROVIDER OR SUPPLIER
MAGNOLIA GARDENS OF WARRENTON

STREET ADDRESS, CITY, STATE, ZIP CODE
**930 HWY 158 BUS E
WARRENTON, NC 27589**

(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 a Biennial Construction Survey by Ed Miller on July 13, 2016.

Record indicate that the facility was licensed on July 1, 1977. The facility is currently licensed for 86 beds. Based on this information, the facility is required to meet the 1977 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 10A NCAC 13F - Licensing of Adult Care Homes of Seven or More Beds, and the 1967 (w/revisions) North Carolina State Building Code; Group D-2 Institutional Occupancy.

Deficiencies were noted which require a Plan of Correction.

C 000



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 commodes, tubs and showers used by or accessible to residents;

This Rule is not met as evidenced by:

1. Based on observation, the facility failed to provide commodes, tubs and showers accessible to residents with hand grips. This deficiency affects all residents who use theses fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures.

Findings on July 13, 2016:

a. Bathroom 35 - there was no hand grips (grab bar) for the shower.

b. Bedroom 6 -in the shared Bathroom there

C 133

Grab bar installed in rm. 35 8/3/16

Grab bar installed in rm 6 8/3/16

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Kim D. Sykes TITLE *Admin* (X6) DATE *9-6-16*

STATE FORM 511W21 If continuation sheet 1 of 11

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C 133	Continued From page 1 was no hand grips (grab bar) for the commode.	C 133		
C 148	<p>Corridors-Handrails</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are: (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the building was not providing handrails in the corridor that could support 250 pounds. This deficiency affects residents, staff and visitors who use unstable handrails by not providing increase safety, stability/balance, and maneuverability provide by these devices.</p> <p>Findings on July 13, 2016: a. Corridor between Bedroom 31 and Employee Only (Storage) - there was no handrail between these two rooms. b. Corridor outside Med Room - there was no handrail at this location.</p>	C 148	<p>Handrail installed in the area</p> <p>Handrail by med rm installed</p>	<p>8/5/16</p> <p>8/16/16</p>
C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, corridors were not free</p>	C 150		

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C 150	Continued From page 2 of all equipment and other obstructions. This would affect all residents, staff and visitors by slowing or obstructing egress during an emergency. Findings on July 13, 2016: a. Special Care Unit Right Exit - there was an unattended linen cart, stationed in front of the exit.	C 150	Linen Cart removed from exit door Mgnts will monitor to assure compliance	7/13/16
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 providing 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 July 13, 2016: a. Front Lobby - both exterior exit doors had panic hardware and barrel bolts at the head locking the doors, which require more than a single hand motion to exit.	C 153		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 164		

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C 164	<p>Continued From page 3</p> <p>FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on Observation, the facility failed to keep walls, ceilings, floors or floor coverings and furniture clean and in good repair.</p> <p>Findings on July 13, 2016:</p> <p>a. Left TV Lounge - the Front Porch exterior light fixture was missing its globe.</p> <p>b. Left TV Lounge - at the corridor door the floor tiles had sunk, creating tripping hazards.</p> <p>c. Bedroom 8 - the corridor door was loose.</p>	C 164	<p>A Light fixture has been replaced</p> <p>B TV. rm. corridor door floor has been repaired</p> <p>C Bedrm B. door secured</p>	<p>8/29/16</p> <p>8/30/16</p> <p>8/31/16</p>
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT</p> <p>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on Observation, the Building was not maintained free of hazards, because the portable medical oxygen cylinders were not being properly handled/stored. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a</p>	C 166	<p>Oxygen tanks placed in rack might with complete checks on this to assure compliance</p>	7-21-16

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C 166	Continued From page 4 dangerous projectile. Findings on July 13, 2016: a. Nurse Station - a portable medical oxygen cylinder was stored standing up not secured to the structure. 2. Based on Observation, a hazard was present due to the possibility of the backflow of contaminated water into the domestic water supply. Findings on July 13, 2016: a. Beauty Shop - the shampoo sink had a sprayer with hose long enough to reach gray water, which was not equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing system. 3. Based on observation, the electrical system was not being maintained safe. Findings on July 13, 2016: a. Beauty Shop - a power tap (power strips) was plugged into another power tap. Power taps cannot be plugged into other power taps or extension cords.	C 166	Portable oxygen is secured inside 7-2-16 This will be monitored to assure compliance Plumber installed vacuum breaker in b. shop sink Power strips in beauty shop have been removed. Staff have been instructed regarding any type of external power cords. This will be checked monthly to assure compliance	8/29/16 7-15-16
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.	C 189		

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C 189	Continued From page 5 This Rule is not met as evidenced by: 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 done without the use of keys, tools or, special knowledge or effort. This could affect some staff and visitors if someone becomes trapped inside. Findings on July 13, 2016: a. Left Whirlpool - the corridor door was equipped with hasp hardware and locked with a padlock. This locking system does not provide an override device allowing exiting from the area. b. Employee Lounge - a corridor door was equipped with hasp hardware and locked with a padlock. This locking system does not provide an override device allowing exiting from the area. 2. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, staff and visitors to fire/smoke if not contained in Room or compartment of origin Findings on July 13, 2016: a. Left Whirlpool- the replacement corridor door hardware (handle) did not completely cover the previous hardware's opening through the door, allowing the spread of fire and smoke. b. Left Whirlpool - there was a gap around a 1 1/2 inch opened ended sleeve not firestopped as it penetrates the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke. c. Shower Room next to Bedroom 3 - in the water heater Closet there were gaps around two metal pipes not firestopped as it penetrates the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke. d. Employee Lounge Corridor Closet - there was a gap around a cable not firestopped as it penetrates the fire-resistance-rated wall assembly, allowing the spread of fire and smoke.	C 189	Hasp hardware removed from whirlpool on door. All hasp hardware has been removed from Emp. lounge Whirlpool corridor gap around door knob ^{has} been closed. The hole has been closed by fire caulking The holes around water heaters have been fire caulked. Gap around cable wire has been fire caulked in Emp lg.	7/14/16 7/14/16 7/14/16 7/14/16 7/15/16

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C 189	<p>Continued From page 6</p> <p>e. Employee Lounge Window Closet - there were gaps around two metal pipes not firestopped as it penetrates the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke.</p> <p>f. Cross-Corridor Doors near Bedroom 9 right side - the exit sign did not completely cover the hole penetrating the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke.</p> <p>g. Eye Wash Room - in the back room about 80 percent of the fire-resistance-rated ceiling had falling down, allowing the spread of fire and smoke.</p> <p>h. Main Office - in the Corridor Closet there was a gap around a conduit not firestopped as it penetrates the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke.</p> <p>i. Maintenance Office -there were two holes in the front room and one in the back room not firestopped as it penetrates the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke.</p> <p>3. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect residents, staff and visitors by not providing early detection and activating the fire alarm system. Findings on July 13, 2016: a. Left Whirlpool -the fire detector has been removed for this room leaving a 1 1/2 inch hole in the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke. In addition there is no early detection of fire or smoke.</p> <p>4. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff and visitors if they could not</p>	C 189	<p>Gaps around pipes in closet have been sealed with fire caulking</p> <p>Hole around exit sign has been closed with fire caulk</p> <p>A new ceiling has been installed in rm behind Eye wash rm</p> <p>Office closet hole has been sealed with fire caulk</p> <p>The 3 holes have been mudded in maint. rm.</p> <p>A smoke detector has been installed in the Whirlpool Rm (hard wired)</p>	<p>7/18/16</p> <p>7/20/16</p> <p>8/20/16</p> <p>8/30/16</p> <p>7/26/16</p>

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C 189	<p>Continued From page 7</p> <p>promptly find their way to an exit during an emergency.</p> <p>Findings on July 13, 2016:</p> <p>a. Left Exit - the exit sign did not work on backup power when tested. Exit signs must work on backup power to provide directions during power outages.</p> <p>b. Exit near Bedroom 4 - the exit sign did not work on backup power when tested. Exit signs must work on backup power to provide directions during power outages.</p> <p>c. Exit near Back Dining Room - the exit sign did not work on backup power when tested. Exit signs must work on backup power to provide directions during power outages.</p> <p>d. Right Firewall right side - the exit sign did not work on backup power when tested. Exit signs must work on backup power to provide directions during power outages.</p> <p>5. Based on observation, the Building was not maintain in a safe manner. This could expose residents, staff and visitors to fire if there was enough fuel for fire to grow beyond the ability of the Building to contain it.</p> <p>Findings on July 13, 2016:</p> <p>a. Bedroom 1 - the room was being used to store combustible items, significantly increasing the fire load without any additional protection.</p> <p>6. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors did not resist the passage of smoke due to the doors not positively/automatically latching into their frame under normal closing force. This could affect all residents, staff and visitors if the doors were not latched and did not contain smoke/fire in the room of origin.</p> <p>Findings on July 13, 2016:</p>	C 189	<p>All exit signs have been ck'd by electrician + have been replaced.</p> <p>The exit signs will be checked monthly + documented to assure compliance</p> <p>All combustible items have been removed + stored away from the bldg.</p> <p>The fire doors have been repaired + close properly</p> <p>They will be checked monthly + documented to assure compliance</p>	<p>7/21/16</p> <p>7/20/16</p> <p>7/14/16</p> <p>8/1/16</p> <p>7/14/16</p>

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C 189	<p>Continued From page 8</p> <p>a. Bedroom 32 - the corridor door's latch bolt will not let the door close and latch into its frame.</p> <p>b. Bedroom 7 - the corridor door hits its frame and will not close and therefore will not latch.</p> <p>c. Cross-Corridor Doors near Bedroom 9 - both fire doors hit their frame and will not latch.</p> <p>d. Nurse Station - the dutch-door top leaf did not automatically latch into the bottom leaf when the bottom leaf was latched to its doorframe.</p> <p>e. Kitchen - the dutch-door top leaf did not automatically latch into the bottom leaf when the bottom leaf was latched to its doorframe.</p> <p>f. SCU Bedroom 11 - the corridor door had a wedge holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch it.</p> <p>g. SCU Living Room - the chair rail on the strike side wall prevents the corridor door from closing, therefore not latching into its frame.</p> <p>h. SCU Dinning - the corridor door will not latch because the frame was damaged and there was no strike plate.</p> <p>i. SCU Bedroom 2 - the corridor door hits will not close and therefore will not latch.</p> <p>7. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire extinguishing system lacked the inspections, maintenance and documentation required to ensure a properly working system. This could affect residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on July 13, 2016: a. Kitchen - Since the semi-annual maintenance of the commercial kitchen hood's fire extinguishing system in February 2016, there has been no record keeping of the monthly inspections.</p>	C 189	<p>Rm 32 The door's latch bolt has been ^{repaired} adjusted to allow closure</p> <p>Rm 7 - door has been adjusted to close properly</p> <p>Fire doors have been repaired</p> <p>Med rm dutch doors + been corrected</p> <p>Dutch door to kitchen corrected so both doors close automatically</p> <p>SCU Rm 11 - wedge removed</p> <p>SCU Liv. Rm - chair rail cut to allow door to close</p> <p>Frame repaired to SCU Din. Rm, strike plate in place + will latch</p> <p>* See Attached request for extension</p> <p>In July + August a monthly insp + documentation has been completed</p>	<p>7/14/16</p> <p>7/15/16</p> <p>8/20/16</p> <p>7/19/16</p> <p>7/19/16</p> <p>7/14/16</p> <p>7/15/16</p> <p>7/27/16</p> <p>7/15/16</p>

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C 189	Continued From page 9 8. Based on observation, the Building plumbing equipment was not in a safe and operating condition. This would affect all staff by not protecting them from unexpected scalding hot water Findings on July 13, 2016: a. Shower Room next to Bedroom 3 - the water heater in the closet did not have a pipe extension for the pressure relief valve. Should the pressure relief valve discharge, the required extension would direct hot water away to a safe location.	C 189	The plumber came and added a pipe extension for relief valve	7/14/16
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 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: 1. Based on Observation, the facility failed to prevent the use of unvented fuel burning room heater(s) portable electric space heater(s) in an Adult Care Home. This could affect residents, staff and visitors if heater was the ignition source of a fire. The danger increases if used by resident or combustible material were near. Findings on July 13, 2016: a. Bedroom 1 - a portable electric space heater,	C 191	All space heaters + fuel burning heaters are removed from bldg	7/14/16

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C 191	Continued From page 10 two unvented fuel burning heaters and several canisters of propane were found in this room.	C 191		
C 199	<p>Exhaust Ventilation</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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:</p> <ul style="list-style-type: none"> (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. <p>(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 and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff and visitors by preventing the exhausting of odors.</p> <p>Findings on July 13, 2016:</p> <p>a. Utility next to Bedroom 32 - the local exhaust ventilation system did not work, allowing a build-up of odors.</p>	C 199	<p>A new exhaust fan has been installed</p>	8/30/14

PROJECT ESTIMATE

MAGNOLIA GARDENS INTERIOR DOOR

CONTACT: SIMPSON, KIM
CUST #: 140245053

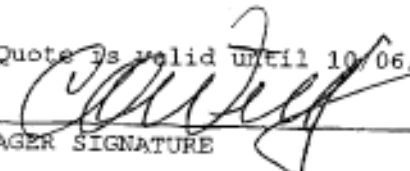
SALESPERSON: LIVESAY, STEVEN
SALES #: 964437

PROJECT NUMBER: 482279728

DATE ESTIMATED: 09/06/16

QTY	ITEM #	ITEM DESCRIPTION	VEND PART #	PRICE
1	37823	FLUSH WOOD INTERIOR PRE-	FIRE RATED DOOR	1169.23
TOTAL FOR ITEMS				1169.23
FREIGHT CHARGES				0.00
DELIVERY CHARGES				0.00
TAX AMOUNT				81.85
TOTAL ESTIMATE				1251.08

This Quote is valid until 10/06/16.



 MANAGER SIGNATURE

9/6/16

 DATE

THIS ESTIMATE IS AN ESTIMATE. THIS IS AN ESTIMATE. ESTIMATE ARE SUBJECT TO QUANTITY, EXTENSION, TERMS SUBJECT TO MANAGER'S SIGNATURE.

3. CONTAINED IN THIS MANUFACTURER OR SUPPLIER. CORRECTION. CREDIT.

LOWE'S IS A SUPPLIER OF ENGINEERING ANY RESPONSIBILITY SELECTION OR QUANTITIES OR FOR COMPLETION



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NOT ENGAGE IN THE PRACTICE
 3. LOWE'S DOES NOT ASSUME
 LIABILITY FOR THE
 PERFORMANCE OF THE
 SPECIFIC USE; FOR
 INSTALLATION OF MATERIALS;
 OR OF WORKMANSHIP.

ORDER INFORMATION

TO OBTAIN A STATUS OF YOUR ORDER VISIT
WWW.LOWES.COM/STATUS

AFTER BEING NOTIFIED THAT THE PICKUP LATER ORDER IS
 AVAILABLE, PLEASE COME TO THE CUSTOMER SERVICE DESK
 TO PICK UP THE MERCHANDISE.

- SOS SALE -

SALES#: 518155L1 964437 TRANS#: 6193170 09-06-16

37823 FIRE RATED DOOR 1,169.23
 FLUSH WOOD INTERIOR PRE-
 [PICK UP LATER - LOWE'S # 1815 on 09/20/2016]

PO #: 33242962
 INVOICE 80923 SUBTOTAL: 1,169.23
 SUBTOTAL: 1,169.23
 TAX: 81.85
 BALANCE DUE: 1,251.08
 VISA: 1,251.08

VISA:XXXXXXXXXXXX9971 AMOUNT:1,251.08 AUTHCD:516002
 SWIPE REFID:181506052361 09/06/16 16:19:41