

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL063007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/03/2017
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NAME OF PROVIDER OR SUPPLIER MAGNOLIA GARDENS	STREET ADDRESS, CITY, STATE, ZIP CODE 594 MURRAY HILL ROAD SOUTHERN PINES, NC 28387
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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
C 000	<p>Initial Comments</p> <p>Construction Section Biennial Survey report Frank Strickland and Ed Miller on 02/03/2017:</p> <p>This facility was first licensed 10/21/1991. An addition was approved in 2012 increasing the capacity of the facility to One hundred Ten (110) Beds, including Thirty-Two (32) Special Care Beds. Based on this information, the original portion of the facility is required to meet the 1991 Homes for the Aged and Disabled- Minimum and Standards and Regulations; applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds; and the 1978 North Carolina State Building Code, Section 409.1- Institutional (I) Occupancy. The addition to the facility is required to meet the 2005 Rules for Adult Care Homes of Seven or More Beds; and the 2009 North Carolina State Building Code, Section 407- Institutional Occupancy.</p> <p>Deficiencies were cited and a Plan of Correction is required.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>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</p>	C 101		

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

TITLE

(X6) DATE

Debbie Opku Executive Vice President 03/03/2017

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C 164	Continued From page 2 facilities. This Rule is not met as evidenced by: 1-Based on observations, this facility has failed to maintain the plumbing fixtures in the bathrooms and bathing areas. Findings on 02/02/2017: The following locations have toilets that are not secured to the floor: (a) Central Bathing/SCU (b) Rooms 510/512	C 164	A & B. Both toilets were Corrected on 2/10/17. Maintenance department Will monitor toilets qom.	
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, this facility has not maintained electrical ground-fault protection in wet areas. Findings on 02/03/2017: The GFCI receptacle that is located Room 204 Bathroom did not reset when test for ground-fault protection:	C 188	GFI was corrected on 2/3/17. Magnolia Gardens' Maintenance Department will monitor GFI's Qom.	
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	C 189		

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C 189	Continued From page 4 Findings on 02/03/2017: The exterior emergency wall light that are located at the following locations did not illuminate when tested: (a) TV Room /100 Hall (b) Court Yard/100Hall (c) Living Room/200 Hall (d) Med Room/200 Hall (e) Wellness Center/200 Hall (f) Room 507 4-Based on observation, this facility has not maintained in a safe and operating condition because the noted interior doors do not latch preventing the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire. Findings on 02/03/2017: The following location of doors do not latch and are out of adjustment: (a) Room 119 (b) Whirlpool Bath/200 Hall (c) Central Bathing/400 Hall 5-Based on observation, this facility has failed to maintain the exhausting of drying equipment. Findings on 02/03/2017: The dryer vent to the exterior is disconnected in the AL Laundry Room.	C 189	A-F. Magnolia Gardens' has repaired all emergency lights. Completion was 2/10/2017. Monthly monitoring of all lights will be completed by staff. A-C. All doors were corrected On 2/06/17. MG will monitor Doors every 6 months. The dryer vent was corrected on 2/20/17. Monthly monitoring Will be made by the Maintenance Department All issues have been corrected And systems are working Properly. The staff will Continue to monitor for Issues on a monthly base.	