

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL092182</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>04/19/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>OLIVER HOUSE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4230 WENDELL BOULEVARD WENDELL, NC 27591</b>
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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}	Initial Comments  Report of a Biennial Follow Up Construction Construction Survey by Suzanna Fay conducted on April 19, 2017.  Deficiencies were cited that will require a new plan of correction.	{C 000}		
{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 keep walls, ceilings, floors or floor coverings and furniture clean and in good repair.  Findings on April 19, 2017: a. Living Room - the texture ceiling was flaking off. Interview with the Maintenance Staff revealed that he had not had time to complete this repair. Maintenance personnel were on site working at the time of this survey. b. Living Room - the door to the patio was damaged. Interview with Maintenance Staff revealed that they had ordered a new door and it had not yet come in. c. Corridors - several areas of the handrails had damage along the bottom edge. At the time of this survey, the rails had been painted and the edges were no longer rough. Interview with	{C 164}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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{C 164}	Continued From page 1  Maintenance revealed that he was investigating options to safely repair the rails without having to replace them. d. Shower Room near Bedroom 203 - the toilet was stopped up. Observations revealed a large quantity of toilet paper in the toilet bowl. Interview with Maintenance revealed that the toilet had been unclogged per the citation, but one of the Residents had filled it with toilet paper prior to this survey.	{C 164}		
{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.  This Rule is not met as evidenced by: 1. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, all to fire/smoke if not contained in Room or compartment of origin  Findings on April 19, 2017: a. 100 Hall Med Room - the gypsum tape and joint compound were deteriorating creating an opening in the fire resistant rated ceiling assembly. Interview with Maintenance revealed that he had not completed this item due to time constraints. Maintenance Staff were on site	{C 189}		

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{C 189}	Continued From page 2  during this survey. b. Bedroom 406 Bathroom - there was a small hole in the corridor wall not firestopped as it penetrates the smoke tight wall. Interview with Maintenance revealed he had difficulty determining where the hole was located and had not yet caulked the hole.	{C 189}		
{C 199}	Exhaust Ventilation  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (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: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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 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.  Findings on April 19, 2017: d. Bedroom 406 Bathroom - the exhaust ventilation system had been replaced. The new unit is smaller than the replaced unit and there is	{C 199}		

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{C 199}	Continued From page 3  an opening in the rated ceiling assembly around the new exhaust fan cover. At the time of this survey, maintenance Staff were directed to patch the ceiling.	{C 199}		