

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL034084</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>05/02/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FORSYTH VILLAGE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5100 LANSING DRIVE WINSTON SALEM, NC 27105</b>
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{C 000}	Initial Comments  Report of Biennial Follow Up Construction Survey by Dennis Harrell and Ed Miller on 5-2-2017.  Many deficiencies were not corrected. Further action is required.	{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: Finding on 1-4-2017 and 5-2-2017: Based on observation, there was no hand grip provided at the tub in the community bathroom on C Hall.	{C 133}		
C 165	Housekeeping and Furnishings-Sanitation Grade  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more; (e) This Rule shall apply to new and existing facilities.	C 165		

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

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C 165	Continued From page 1  This Rule is not met as evidenced by: Based on a review of documents, the most recent Sanitation inspection is dated 2-27-2017. The grade of 72 is far below the minimum requirement..	C 165		
{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, new inspection tags had been placed on the fire extinguishers in March, 2017. However, the required monthly inspections were not being done. Finding on 5-2-2017: A monthly inspection had not been done in April.  3. Based on observation, a new inspection tag had been attached on the range hood fire suppression system by a vendor in March, 2017. However, the required monthly inspections were not being done. Finding on 5-2-2017: A monthly inspection had not been done in April.  5. Based on observation, the ice machine drain line extended into the floor drain. Ice machine drain lines that are not maintained at least 2 inches above the floor or floor drain, as required	{C 166}		

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{C 166}	Continued From page 2  by Code, could cause the ice to become contaminated. Finding on 5-2-2017: The ice machine drain was laying directly on the floor drain.	{C 166}		
{C 185}	Fire Safety-Rehearsals on Each Shift  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: Finding on 1-4-2017 and 5-2-2017: Based on a review of documents, the only records available onsite included no description of what the rehearsal involved.	{C 185}		
{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.	{C 189}		

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{C 189}	<p>Continued From page 3</p> <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 interview, the staff stated the fire alarm system had been repaired. However, based on observation, the fire alarm system was not being maintained in a safe and operating condition. Fire alarm systems that do not work properly endanger all residents and staff. Finding on 1-4-2017 and 5-2-2017:</p> <p>a. The corridor smoke detector near bedroom 30 still failed to activate the fire alarm system when tested with smoke. Finding on 5-2-2017:</p> <p>b. The fire alarm system worked when tested but the display states it is "Disarmed" and also states the following need to be checked;</p> <p>i. 32 SD 1 ii. 53 SD 2 iii. 62 DS 3 iv. 76 SD 4 v. 77 SD 5 vi. 975 Dialer 2</p> <p>3. 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 on 1-4-2017 and 5-2-2017:</p> <p>c. Hole in the ceiling in the outside AC room near the maintenance room. d. New high efficiency gas furnaces were installed in all 4 outside AC rooms in 2008 or later. The furnace flues are 3 inch PVC pipes</p>	{C 189}		

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{C 189}	Continued From page 4  that extend up through the one-hour fire protected ceilings. None of the flues were protected with a listed fire collar as required.  4. Based on observation, some corridor doors will not close and/or latch 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 the following doors on 1-4-2017 and 5-2-2017: a. The door to bedroom 33 would not latch when closed. b. The door to bedroom 14 does not fit the opening properly to be resistant to the passage of smoke. Finding on 5-2-2017: The door to the community bathroom on C Hall had been replaced but it would not latch when closed.	{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	{C 199}		

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{C 199}	Continued From page 5  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 maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly bacteria. Findings on 1-4-2017 and 5-2-2017; a. The exhaust system was not working in the bathroom off bedroom 34. b. The exhaust system was not working in the corridor bathroom near room 14.	{C 199}		