

PRINTED: 05/09/2017
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092182	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 04/19/2017
NAME OF PROVIDER OR SUPPLIER OLIVER HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 4230 WENDELL BOULEVARD WENDELL, NC 27591		
(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)	Responses to the cited deficiency does not constitute an admission or agreement by the facility of the truth of fact alleged or conclusions set forth in the Statement of Deficiency or Corrective Action Report; The Plan of Correction is prepared solely as a matter of compliance with State law.	
(C 154)	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 154)	10A NCAC 13F .0306 Housekeeping and Furnishings: The living room ceiling will be repaired by 6-15-17 by BMS. The living room door to the patio has been ordered and should be replaced by 6-1-17.	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

7Z1122

If continuation sheet 1 of 4

Kimberly Pruitt

Executive Director

05/17/17

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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)	BMS will be shaving down rails to even them out so there are no more jagged edges. This will be completed by 6-15-17. The toilet was unclogged on 4-19-17.	
(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 (a) 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)	10A NCAC 13F .0311 Other Requirements: The ceiling was repaired on 4-24-17.	

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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)	The hole was caulked on 4-24-17 by BMS.	
(C 189)	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 189)	10A NCAC 13F .0311 Other Requirements: The ceiling around the exhaust was repaired on 4-26-17 by BMS.	

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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}		