

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL053004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/04/2017
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NAME OF PROVIDER OR SUPPLIER PARKVIEW RETIREMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1801 WICKER STREET EXT SANFORD, NC 27330
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Billy S. Bryant and Suzanna Fay conducted on 05/04/2017.</p> <p>Records indicate this facility was first licensed on 06/01/1988. The facility is currently licensed for 116 Beds. Additions to the facility were made in 1996 and 1998 Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1978 and 1996 with 1998 Revision Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1987 and 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensures.</p>	C 000		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(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.</p> <p>This Rule is not met as evidenced by: 1. Based on observation the facility is not maintained free from hazards.</p> <p>Finding on 05/04/2017: a. Kitchen - The walk-in freezer and cooler have had hasp type locks added to the freezer and cooler doors that defeat the purpose of the safety devices inside the cooler and freezer that would allow anyone who might become locked inside to</p>	C 166	<p>Hasp Type Locks will be removed from freezer and walk in cooler to allow exit of personnel that may become locked inside. Maintenance Staff/Kitchen Personnel/Administration inserviced on inability to lock freezer and walk in cooler.</p>	5/26/2017

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

Linda K. Kelly RN/Adm

TITLE

RN/Adm

(X5) DATE

5/17/17

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C 189	Continued From page 2 dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. e. 300 Hall, Water Heater Closet Across from Linen Closet - There are gaps around the piping lines to and from the water heater where they penetrate the fire resistant rated ceiling. f. Main Electrical Room - There are gaps around the conduits form the electrical panels where they penetrate the fire resistant rated ceiling. g. 500 Hall Laundry Room - There is damage around the dryer exhaust duct where it penetrates the fire resistant rated ceiling. h. 500 Hall Near Beauty Salon - A fire sprinkler head escutcheon has dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Finding on 05/04/2017: a. Corridor Adjacent to Room 104 - The wall mounted emergency light did not operate when tested on battery power. 3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if exit signs indicating the location of exit paths could not be seen in the event of an emergency evacuation.	C 189	d. Fire sprinkler head escutcheon will be repaired and fire resistant caulking will be put around. Maintenance Staff will be inserviced on importance of identifying gaps and repairing gaps with appropriate fire rated caulking.	5/26/2017
		C 189	e. 300hall water heater closet gaps around pipe lines and from water heater where penetrates ceiling will be caulked with fire resistant caulking.Maintenance Staff will be inserviced on importance of identifying gaps and repairing gaps with appropriate fire rated caulking.	5/26/2017
		C 189	f. Gaps on ceiling around conduit in main electrical room will be caulked with fire rated caulking.Maintenance Staff will be inserviced on importance of identifying gaps and repairing gaps with appropriate fire rated caulking.	5/26/2017
		C 189	g. Damage around dryer exhaust duct penetrating ceiling will be caulked with fire rated caulking and repaired. Maintenance Staff will be inserviced on importance of identifying gaps and repairing gaps with appropriate fire rated caulking.	5/26/2017
		C 189	h. The fire sprinkler head escutcheon that is dropped will be replaced to prevent gap in fire resistant ceiling. Maintenance Staff will be inserviced on importance of identifying gaps and repairing gaps with appropriate fire rated caulking.	5/26/2017
		C 189	The wall mounted emergency light in corridor adjacent to room 104 will be replaced. Staff to be inserviced about checking daily even though facility is fully emergency generated.	5/26/2017

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C 189	Continued From page 3 Finding on 05/04/2017: a. New Wing Living Area - The illuminated direction indicating exit sign did not operate on battery power when tested. 4. Based on observation electrical emergency/safety related equipment is not being maintained in safe operating condition. Failure to maintain electrical emergency safety equipment in safe and operable condition could effect occupants of the facility if the equipment did not function when and as required. Finding on 05/04/2017: a. Serving kitchen - The room's ceiling smoke detector has detached from its mounting base and is hanging by its wiring. 5. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors that open to corridors are required to close completely and latch in the event of a fire to resist the passage of smoke. The occupants in the smoke compartment could be effected if doors do not completely close and latch or have gaps that could prevent them from limiting the spread of smoke or fire to the area of origin. Finding on 05/04/2017: a. 500 Hall Dining Room - The bottom half of the dutch door to the corridor door has dropped down so that it does not latch to remain closed when shut.	C 189	a. The illuminated exit sign will be repaired by either replacing the battery or replacing the sign. Staff will be inserviced on testing exit signs to assure battery compliance.	5/26/2017
		C 189	a. The smoke detector in the serving kitchen will be reattached to its mounting base. Staff to be inserviced to report to maintenance as well as maintenance observing for detachments.	5/26/2017
		C 189	a. The bottom half of the dutch door to the corridor will be repaired so that it will latch as required. Inservice will be completed with staff to assure no one is leaning on doors and to report to maintenance when a problem occurs.	5/26/2017
		C 189	The dutch door into the dining area will be repaired to prevent the 1/4" gap between the bottom and the top sections of the panels. Inservice will be completed with staff to assure everyone is aware to report to maintenance any time a problem occurs.	5/26/2017
		b. Serving Kitchen - The dutch door into the dining area has an approximately 1/4" gap between the top and bottom section of the door panels.		

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C 189	Continued From page 4 c. Room 506 - The door from the room to the corridor hits the door frame preventing it from completely closing and latching. 6. Based on observation the electrical equipment has not been maintained in a safe manner. Failure to maintain electrical equipment in a safe manner could effect the safety of person exposed to the unsafe condition. Finding on 05/04/2017: a. Whirlpool Room #2 - The wall mounted electrical outlet behind the tub has pulled away from the wall possibly exposing energized electrical wires to occupants. b. 200 Hall Laundry - The wall mounted electrical outlet behind the tub has pulled away from the wall possibly exposing energized electrical wires to staff in the laundry.	C 189	The 506 room door will be adjusted to assure that it closes completely & latches. An inservice will be given to maintenance staff for identifying and maintaining proper closure for doors. a. The w/p outlet will be repaired and staff has been inserviced on importance of informing maintenance and maintenance inserviced on observing electrical outlets. b. The outlet behind laundry tub will be repaired by an electrician. Staff has been inserviced on importance of informing maintenance and maintenance inserviced on observing electrical outlets.	05/26/17 05/26/17 05/26/17
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)	C 199	Room #305 and 506 exhaust fan will be repaired or replaced by an electrician. Inservice was given to all staff concerning informing maintenance staff and maintenance staff inserviced on observing electrical outlets.	05/26/17

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C 199	Continued From page 5 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility failed to provide the required exhaust ventilation equipment in spaces required to be mechanically exhausted by rule. Finding on 05/04/2017: a. Resident Rooms 305 and 506 - the exhaust fan in the resident's bathroom room is not working.	C 199	(See pg. 5)	