

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL034093</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>06/02/2017</b>
NAME OF PROVIDER OR SUPPLIER  <b>DANBY HOUSE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3150 BURKE MILL ROAD WINSTON SALEM, NC 27103</b>		
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C 000	Initial Comments  Report of a Construction Biennial Survey by Suzanna Fay and Dennis Harrell conducted on June 2, 2017.  Records indicate the Carolina and Salem Wings were completed in 1980 and are not sprinkler protected. That portion of the facility must meet the 1977 Rules, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1978 North Carolina State Building Code, Section 409, Institutional Occupancy. The Piedmont and Winston Wings, along with the Special Care Unit was first licensed or submitted on 7-30-1998. Therefore that part of the facility must meet the 1996 Rules, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 North Carolina State Building Code, section 409, Institutional Occupancy. The facility is licensed for 100 beds total with 48 in a Special Care Unit.	C 000		
C 132	Bathrooms-Must Provide Privacy  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains;  This Rule is not met as evidenced by: 1. Observations revealed that the facility did not provide privacy in one of the toilet rooms.	C 132		

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

*Jeresa Dillon*

TITLE

Executive Director

(X6) DATE

06/21/2017

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C 132	Continued From page 1  Findings on June 2, 2017: a. AL Shower/Spa - the toilet did not have a privacy curtain.	C 132	Curtain rod has been installed. Curtain ordered. Estimated complete date: 07/05/2017	
C 136	Bathrooms-Must Be Mechanically Ventilated  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (11) Toilets and baths shall be well lighted and mechanically ventilated at two cubic feet per minute. The mechanical ventilation requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation;  This Rule is not met as evidenced by: 1. Observations revealed that two of the bathroom fans were not working and could not ventilate the rooms.  Findings on June 2, 2017" a. Room 114 - the exhaust fan was not working. b. AL Shower/Spa - the exhaust fan was not working.	C 136	Fan in room 114 has been repaired.  Replacement fan for AL Shower/Spa ordered. Estimated complete date: 07/15/2017	6/19/2017
C 143	Janitor's Closets-Locked  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be monitored while in use;	C 143		

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C 143	Continued From page 2  This Rule is not met as evidenced by: 1. Observations revealed that the facility did not keep the Janitor closets locked. This affects the safety of the residents.  Findings on June 2, 2017: a. At the time of this survey, the janitor closet on the MCU hallway was unlocked.	C 143	Housekeeping staff have been instructed on the importance of keeping the janitor closets locked at all times. Notice reminder has been placed in both janitor closets. Housekeeping supervisor and ED will continuously monitor.	06/02/2017
C 153	Exit Door Locks-Single Hand Motion  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and  This Rule is not met as evidenced by: 1. Observations revealed that one of the exits did not operate by single hand motion.  Findings on June 2, 2017: a. The exit door by Room 128 had locking hardware that did not release using single hand motion. This door was sticking and very difficult to open.	C 153	Replacement exit door handle has been ordered. Estimated complete date: 07/15/2017	
C 160	Outside Premises-Clean, Safe  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are:	C 160		

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C 160	<p>Continued From page 3</p> <p>(1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the outside grounds were not maintained in a safe condition.</p> <p>Findings on June 2, 2017:</p> <p>a. There is a drainage pipe outside the MCU hall exit that runs across the path of egress creating a tripping hazard.</p> <p>b. Outside the AL wing, one of the window screens has fallen out and is laying on the ground.</p> <p>c. One of the wood benches outside the kitchen exit is heavily damaged and not safe for seating.</p>	C 160	<p>Drainage pipe has been moved to the side of the building and has been fixed in place</p> <p>Window screen has been reinstalled</p> <p>Two benches have been replaced.</p>	<p>06/05/2017</p> <p>06/02/2017</p> <p>06/21/2017</p>
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the walls were not maintained in good repair.</p> <p>Findings on June 2, 2017:</p> <p>a. 100 hall tub bath - the wall finish above the tub surround was bubbled and beginning to flake.</p>	C 164	<p>Wall has been repaired.</p>	<p>06/19/2017</p>

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C 164	Continued From page 4  2. Observations revealed that the ceilings were not maintained in good repair.  Findings on June 2, 2017: a. The ceiling at the smoke doors on the MCU was damaged. The finish had a 2' long crack between the doors and the smoke alarm.  3. Observations revealed that the floors were not maintained in good repair.  Findings on June 2, 2017: a. Room 119 - the threshold at the bathroom door was missing.  4. Observations revealed that the facility was not maintained free of unpleasant odors.  Findings on June 2, 2017: a. MC Soiled linen - the soiled linen room had a strong unpleasant odor. At the time of this survey, there were no soiled linens in the room.	C 164	Ceiling at the MC smoke doors has been repaired.  Bathroom threshold of room 119 has been replaced  It was determined odor was coming from an open toilet flange. This has been corrected	06/19/2017  06/19/2017  06/19/2017
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. Observations revealed that the facility was not maintained free of obstructions and hazards.	C 166		

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C 166	Continued From page 5  This affects the safety of the residents, staff and visitors.  Findings on June 2, 2017: a. Several dozen clothes hangers were hanging on the handrails on either side of the corridor outside the nurses' station. A laundry basket was sitting on the floor under the hangers. b. Oxygen Storage Room - 12 oxygen tanks were found unsecured. c. Room 120 - one oxygen tank was unsecured in the bedroom. d. MCU - the carpet is pulled up at the threshold of the hall exit creating a tripping hazard. e. Room 219 - one of the towel bars on the adjoining bathroom door was broken off leaving the exposed metal brackets.	C 166	Staff has been instructed, and notice has been posted, that hangers must never be placed on handrails. This will be monitored by the Care Managers on each unit and the ED  All oxygen suppliers have been contacted and asked to bring racks for their tanks. Estimated completion date: 07/05/2017 On-going this will be monitored by Care Managers on both units and the ED  Resident has been spoken to about unsecured oxygen tanks. Staff has been instructed to continuously monitor.  A transition piece will be installed at threshold to secure carpet. Estimated completion date: 07/15/2017  Towel bar in room 219 has been replaced	06/02/2017           06/02/2017           06/19/2017
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: 1. Review of records revealed that the facility failed to maintain accurate fire rehearsal records.	C 185		

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C 185	Continued From page 6  Findings on June 2, 2017: a. The fire drill records did not provide a short description of what the rehearsal involved.	C 185	Fire drills are conducted by the ED. All future fire drill records will provide required description as instructed.	06/02/2017
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. Observations revealed that the building was not maintained in a safe condition by allowing penetrations in fire protected assemblies. This would allow the passage of fire and smoke and affects the safety of the residents, staff and visitors.  Findings on June 2, 2017: a. Mechanical Room by front entry - one of two 3" conduits by the fire alarm did not have fire caulk at the opening. b. Corridor outside of visitors' baths - one of the attic access hatches had insulation and wire hanging out at the edges of the opening which does not allow the hatch to close tightly. c. Sprinkler Room - the fire rated access hatch was damaged. Large holes had been made in the outer panel at the knobs. d. MC Smoke doors - the fire rated access hatch	C 189	Conduit has been caulked  This hatch has been securely closed  Hatch door will be replaced. Estimated completion date: 07/15/2017	06/19/2017  06/19/2017

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C 189	<p>Continued From page 7</p> <p>was damaged. Large holes had been made in the outer panel at the knobs.</p> <p>2. Observations revealed that the life safety equipment was not maintained in a safe and operating condition.</p> <p>Findings on June 2, 2017:</p> <p>a. The emergency light (H8) outside the residents' kitchen was not working.</p> <p>b. The emergency light at the cross corridor doors on the right wing of the AL unit was not working.</p> <p>c. The battery for the override switch alarm was dead at the AL side exit.</p> <p>d. The alarm for the override switch at the MCU corridor exit did not sound which could allow for elopement.</p> <p>3. Observations revealed that the fire doors were not maintained in operating condition.</p> <p>Findings on June 2, 2017:</p> <p>a. The right push bar on the cross corridor doors by the nurses' station was sticking making the door difficult to open.</p> <p>b. The cross corridor doors at the left wing of the 100 hall did not latch when released.</p> <p>4. Observations revealed that the bedroom doors were not maintained in a safe and operating condition. Propping doors open or doors that do not latch and close allows for the passage of smoke.</p> <p>Findings on June 2, 2017:</p> <p>a. The following rooms were found with doors propped open: Room 109, Room 116, Room 118 and Room 128.</p> <p>b. Room 126 - the door was dragging on the</p>	C 189	<p>Hatch door will be replaced. Estimated completion date: 07/15/2017</p> <p>Emergency light (H8) has been repaired. New emergency light for cross corridor doors has been ordered. Estimated completion date: 07/15/2017</p> <p>Battery has been replaced on override switch at AL side exit.</p> <p>Battery has been replaced on override switch on MC corridor exit.</p> <p>Push bar has been cleaned and oiled.</p> <p>All doors have been tested and found to latch properly.</p> <p>Residents are known to prop their doors open. Staff has been instructed to monitor and discourage residents from this practice on an individual basis.</p>	<p>06/02/2017</p> <p>06/02/2017</p> <p>06/02/2017</p> <p>06/14/2017</p> <p>06/14/2017</p> <p>06/02/2017</p>
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C 189	<p>Continued From page 8</p> <p>frame making it difficult to operate.</p> <p>c. Room 204 - the corridor door did not latch.</p> <p>d. Room 201 - the door is dragging on the frame.</p> <p>5. Observations revealed that the doors were not maintained in operating condition.</p> <p>Findings on June 2, 2017:</p> <p>a. Room 102 - the door hardware on the bathroom door was loose.</p> <p>6. Observations revealed that the plumbing fixtures were not maintained safe.</p> <p>Findings on June 2, 2017:</p> <p>a. Room 119 - the sink in the bath was loose and the caulking was beginning to separate.</p> <p>b. MC Spa (200 Hall) - the toilet seat was broken and not safe for use.</p> <p>7. Observations revealed that the mechanical exhaust system was not maintained in operating condition.</p> <p>Findings on June 2, 2017:</p> <p>a. One of the exhaust ducts in the attic at the 100 hall had fallen and the exhaust is currently venting into the attic.</p> <p>8. Observations revealed that the exterior of the building was not maintained in good condition.</p> <p>Findings on June 2, 2017:</p> <p>a. The fascia trim at the dining room exit in the MCU was rotted and heavily damaged.</p> <p>b. The exterior fascia trim at both corners was rotting and damaged at the back side of the AL wing.</p> <p>c. Two of the wood shutters on the AL wing facing the MCU were heavily damaged.</p>	C 189	<p>New hardware has been ordered for doors of rooms 126, 204, and 201. Estimated completion date: 07/15/2017</p> <p>Hardware of room 102 has been tightened.</p> <p>Sink of room 119 has been tightened and caulked.</p> <p>Toilet seat has been replaced in MC spa.</p> <p>Exhaust ducts in attic have been repaired.</p> <p>Fascia at MC dining room exit will be replaced. Estimated completion date: 06/22/2017</p> <p>Fascia at corners of AL will be replaced. Estimated completion date: 06/22/2017</p> <p>All damaged wood shutters will be replaced. Estimated completion date: 06/22/2017</p>	<p>06/02/2017</p> <p>06/02/2017</p> <p>06/14/2017</p> <p>06/19/2017</p>

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C 189	Continued From page 9  d. A section of the exterior soffit was pulling loose leaving a small gap in the soffit at the AL wing facing the MCU (near the 2nd window from the back exit.)	C 189	Loose soffit will be replaced and/or repaired. Estimated completion date: 06/22/2017	
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