

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL007014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 04/05/2017
NAME OF PROVIDER OR SUPPLIER CLARA MANOR		STREET ADDRESS, CITY, STATE, ZIP CODE 1218 PAMLICO STREET WASHINGTON, NC 27889		
(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 Construction Section Biennial Survey by Ed Miller on April 5, 2017. Records indicate this facility was first licensed on September 1, 1962, as a Home for the Aged (HA). The facility is currently licensed for 20 beds. Therefore the facility must meet the 1971 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes. Deficiencies were cited that require a Plan of Correction.	C-000		
C-116	Plans Submittals and Approvals SECTION 0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure. Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and	C-116		

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

Dianna J. Benton

TITLE

Administrator

(X6) DATE

5-30-17

STATE FORM

(10)

VYP921

If continuation sheet, 1 of 11

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C 116	<p>Continued From page 1</p> <p>reviewed by the Division.</p> <p>(d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained.</p> <p>(e) Completed construction or remodeling shall conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder.</p> <p>(f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion.</p> <p>This Rule is not met as evidenced by</p> <p>1. Based on observation and interview with Executive Director, the facility failed to submit all construction document and specifications for review and approval prior to changing the use of the space.</p> <p>Findings on April 5, 2017:</p> <p>a. Manager Apartment - the Manager apartment is being used to house an Assisted Living Resident and the room has not been approved for that use.</p> <p>The following item detail the deficiencies for that room.</p> <p>i. Bedrooms must be directly off of a corridor. This bedroom is only accessed through the Wash Room (Housekeeping) or an outside door.</p> <p>ii. Resident bathrooms are required to have hand grips. The bathroom off this sleeping area has a commode that does not have a grip.</p>	C 116			

See Apartment is being leased as an Apartment-

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C 160	<p>Outside Premises-Clean, Safe</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(m) The requirements for outside premises are:</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. Based on observation, the outside grounds were not maintained in a safe condition.</p> <p>Findings on April 5, 2017:</p> <p>a. Right Side Back Exit Ramp - the handrail and guardrail are loose, and may not support a 250 pound concentrated load.</p> <p>b. Right Side Back Exit Ramp - the guardrail has loose and missing pickets.</p> <p>c. Right Side Back Exit Ramp - the guardrail has nails backing out of the boards creating cut and trip hazards</p>	C 160	<p>The facility will assure that all rails are properly secure and safe for all residents without hazards. Maintenance will address issues</p>	4/26/17
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. Based on Observation, the facility failed to keep floors or floor coverings clean</p>	C 164		

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C 164	Continued From page 3 Findings on April 5, 2017: a. Kitchen - the floor had an accumulation of dirt, stains, and grease deposits along the perimeter of the room and around equipment supports. b. Right Side Back Exit - the floor tiles at the door are cracked and dirty 3. Based on observation, the facility failed to keep ceiling clean and in good repair. Findings on April 5, 2017: a. Kitchen Restroom - the exhaust fan cover, have an excessive accumulation of dust/lint. b. Staff Bath - the exhaust fan cover, have an excessive accumulation of dust/lint. c. Living Room - the HVAC grille, have an excessive accumulation of dust/lint.	C 164	<i>The facility will assure that all equipment is kept in compliance. Manager will monitor kitchen and maintenance will replace needed repair work -</i>	6/3/17
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, the Building was not maintained free of hazards, because the portable medical oxygen cylinders were not being properly handled/stored. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on April 5, 2017:	C 166	<i>The facility will assure that all exhaust equipment is clean and free from dust and dirt - Manager monitors weekly -</i> <i>The facility will assure that they are free of objects that could fall and cause hazard if not stored properly to protect everyone - Manager monitors</i>	6/3/17

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C 166	Continued From page 4 a. Wash Room - eight portable medical oxygen cylinders were stored standing up in a beverage crate not secured to the structure.	C 166			
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (c) 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 provide residents areas with the required individual towels and/or towel bars for each resident. Findings on April 5, 2017 a. Bedroom 12 Bathroom - this double occupant bedroom had one of its two towel bars broken.	C 175	The facility will assure that each resident has their required towels and bars to hang their supplies on. And equip is in good use.	6/30/17	
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to	C 183	The facility has will	5/3/17	

The facility will assure that each resident has their required towels and bars to hang their supplies on. And equip is in good use.

The facility has will
~~will~~ assure that all fire extinguishers are up-to-date as required. Manages sign off and check monthly and annually have serve.

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C-183	Continued From page 5 properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to grow larger. This would affect all residents, staff and visitors by not identifying emergency equipment not in proper working order. Findings on April 5, 2017: a. Entire Building - the annual fire extinguishers maintenance tags have no identifying date of service. b. Exterior HVAC Room - the fire extinguisher in the room had not been maintained and inspected.	C-183		
C-188	Electrical Outlets in Wet Locations SECTION 0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff and visitors by not providing ground fault protection to these devices. Findings on April 5, 2017: a. Staff Bath - the light fixture above the sink had an electrical power receptacle that was not protected from ground faults.	C-188		
C-189	Building Equipment Maintained Safe, Operating SECTION 0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C-189		

The facility will assure that all electric power receptacles are properly protected to prevent any hazard to others.

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C 189	Continued From page 6 (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 observation, the Building was not maintained in a safe and operating condition, because the fire rated door in a Firewall did not close completely and latches in order to contain smoke/fire. This could affect all residents, staff, and visitors by not containing smoke/fire in the fire compartment of origin. Findings on April 5, 2017: a. Firewall Door - the door hits the doorframe, preventing it from closing and latching when the fire alarm signal releases the hold open device. 2. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff, and visitors if they could not promptly find their way to an exit during an emergency. Findings on April 5, 2017: a. Right Side Back Exit - the front face of the exit sign had both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit, but the way out is to the right. b. Staff Station - the emergency lights of the ceiling mounted self-contained combination exit sign/emergency light unit did not illuminate on backup power when the test button was pushed. c. Left Side Exit - the exit sign had its left chevron directional indicator punch-out removed.	C 189	<i>The facility will assure that all plumbing and mechanical equipment are working properly -</i> <i>The facility will make sure that all doors in the facility close and latches and releases if event of fires - that Exit signs are properly in use and in correct position with complete direction. Maintenance also keeps check of maintenance issues -</i>	6/3/17 6/3/17

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C 189	Continued From page 7 indicating that you should turn left to exit, but the way out is straight. 3. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect residents, staff and visitors by not providing early detection and activating the fire alarm system. Findings on April 5, 2017: a. Corridor Closet near Staff Bath - the fire alarm system's heat smoke detector was dangling from the ceiling by its power/operational wires. b. Exterior HVAC Room - the heat collector on the heat detector had been bent, which could affect the proper operation of the detector. c. Exterior HVAC Room - the fire alarm system's heat smoke detector was dangling from the ceiling by its power/operational wires. Deficiency corrected before Construction Surveyor departed the site. 4. Based on observation, the interior doors were not maintained in a safe and operating condition. Findings on April 5, 2017: a. Dining Room - the corridor door hits the floor, preventing it from closing and latching. b. Kitchen - the door to Dining hits the floor, preventing it from closing and latching. c. Bedroom 11 - the corridor door does not latch. 5. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system	C/189	<i>The facility will assure that all heat detectors are properly installed and not dangling loose in the ceiling. The facility will assure they are properly stored.</i> <i>The facility will make sure that the doors does not hit the floors and assure latches are free to latch when closing doors.</i>	4/5/17	6/30/17

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C-189	Continued From page 8 fails to operate properly when needed. Findings on April 5, 2017 a. Kitchen - per the attached maintenance tag the commercial kitchen hood's fire suppression system had its last semi-annual maintenance performed in June of 2016. 6. Based on Observation, the Building was not maintained in a safe and operating, because some building components fail to function as originally intended. This could affect all residents, staff and visitors if the component or assembly does not function properly and cannot contain smoke/fire in the room or fire compartment of origin. Findings on April 5, 2017. a. Bedroom 6 - the corridor doorknob was installed backwards, which present the possibility that someone could be locked in a room. 7. Based on observation, the electrical system was not being maintained safe. Findings on April 5, 2017. a. Storage A5 - many items are stored in front of the electric panels, limiting the required 36-inches minimum clear working space to 29-inches. This prevents quick access in any emergency. 8. Based on observation, the Building was not maintained in a safe and operating condition because the electrical lighting system was not being operated or maintained safely, providing reliable illumination. This could affect all residents, staff and visitors if walking areas and drives are not properly illuminated, warning of tripping hazards or obstructions. Findings on April 5, 2017 a. Right Side Front Exit - the exterior light fixture was not operating to illuminate the steps. b. Left Side Exit - the exterior light fixture was	C-189	<i>The facility will make sure that hood fire suppression systems are properly maintained -</i> <i>The facility will assure that door knobs are properly installed -</i> <i>All electrical systems are properly systems are maintained</i> <i>The facility assure that exterior light fixtures are working properly.</i>	6/30/17

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C 189	Continued From page 9 not operating to illuminate the steps. 9. 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 5, 2017: a. Old Manage Apartment- the closet has several cable penetration of the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyor departed the site. 10. Based on observation, the Building plumbing equipment was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors by not protecting them from falls or injury due to broken, loose or missing parts. Findings on April 5, 2017: a. Bedrooms 19 & 21 Shared Bath Room - the commode's "L" shaped hand grip (grab bar) was loosely connected to the structure b. Ladies Bathroom near bedroom 12 - the commode's "L" shaped hand grip (grab bar) was loosely connected to the structure c. Bathroom 2 - the commode's "L" shaped hand grip (grab bar) was loosely connected to the structure. d. Staff Bathroom - the commode's "L" shaped hand grip (grab bar) was loosely connected to the structure.	C 189		
C 195	Hot Water System SECTION 0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 195		

The facility make sure hand grip bars are tightened so as not to cause a hazard. 6/30/17

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C 195	<p>Continued From page 10</p> <p>(d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C).</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 Observation, the Facility failed to maintain the hot water temperature at all fixtures used by residents to be a minimum of 100 degrees Fahrenheit and shall not exceed 116 degrees Fahrenheit.</p> <p>Findings on April 5, 2017:</p> <p>a. Ladies Bathroom - the sink had a hot water temperature of 92 degrees Fahrenheit.</p>	C 195	<p>The facility will assure that Water temp will maintain a degree as required rules and regulations.</p>	6/10/17