

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL031003	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 08/09/2017
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NAME OF PROVIDER OR SUPPLIER GOLDEN CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 4002 SOUTH NC 41 WALLACE, NC 28466
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(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 Biennial Follow Up Construction Survey by Dennis Harrell on 8-9-2017. Most deficiencies were not corrected. Further action is required.	{C 000}		
{C 111}	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on an interview with the administrator the facility failed to have current (within the calendar year) required inspection reports maintained on site for review by the surveyor. Finding on 6/6/2017: a. The most current fire alarm system inspection report was dated 2-19-16. Fire alarm systems that are not inspected and approved as required could result in the fire alarm system not operating properly in the event of an actual fire. b. Based on review of documents, a current sanitation report for the building was not available in the home for review. Finding on 8-9-2017: The onsite staff did not have access to the required documents listed above and the Administrator was not available.	{C 111}		
{C 164}	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT	{C 164}		

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

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{C 164}	<p>Continued From page 1</p> <p>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: Based on observation the walls, floors and doors are not in good repair. Findings on 3-2-2017 and 6-6-2017 and 8-9-2017:</p> <p>a. The corridor walls in the facility are scuffed and discolored.</p> <p>b. The corridor doors are scraped, marred and scarred.</p> <p>Note; Some corridor doors had been repaired.</p>	{C 164}		
{C 165}	<p>Housekeeping and Furnishings-Sanitation Grade</p> <p>SECTION .0300 - PHYSICAL PLANT</p> <p>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(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;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by: Based on observation the facility did not have a</p>	{C 165}		

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{C 165}	<p>Continued From page 2</p> <p>North Carolina Division of Environmental Health sanitation scores of 85 or above.</p> <p>Finding on 03/02/2017: 1. The posted sanitation grade for the facility was 80. Note: The most recent building sanitation inspection report was not available for review at the time of the survey.</p> <p>Finding on 6-6-2017 and 8-9-2017: The most recent building sanitation inspection report was not available for review at the time of the original survey or the follow-up surveys.</p> <p>Further finding on 8-24-2017: Based on interview by phone with Environmental Health staff, the most recent inspection for the building was conducted on 5-3-2017, and posted a grade of 75.</p>	{C 165}		
{C 189}	<p>Building Equipment Maintained Safe, Operating</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. Based on observation electrical emergency/safety related equipment is not being maintained in safe operating condition. Failure to</p>	{C 189}		

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{C 189}	<p>Continued From page 3</p> <p>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. Findings on 3-2-2017 and 6-6-2017 and 8-9-2017: c. Cross Corridor Doors at the Fire Wall - The bulbs that illuminate the direction indicating exit signs on both sides of the doors are burned out. d. 100 Hall - The bulbs for the night lights are burned out.</p> <p>Further finding on 8-9-2017; The exits signs at the back door and in the corridor near room 202 were not working.</p> <p>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 3-2-2017 and 6-6-2017 and 8-9-2017: b. 100 Hall, Adjacent to Room 109 - The wall mounted emergency light still did not operate when tested on battery power.</p>	{C 189}		