

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL001149	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/28/2017
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NAME OF PROVIDER OR SUPPLIER LANE ST RETIREMENT HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 625 LANE STREET BURLINGTON, NC 27217
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C 000	<p>Initial Comments</p> <p>Report of Construction Section Biennial Survey by Ed Miller on July 28, 2017.</p> <p>Records indicate this facility was first licensed as a Home for the Aged serving 12 ambulatory residents on March 26, 1993. Therefore, the facility must meet the 1991 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1991 NC State Building Code(s) section 409.1 for a Group I-Institutional Unrestrained Occupancy.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 111	<p>Must Have Current San. & Fire Safety Reports</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. Based on record review, and interview with Staff in Charge, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on July 28, 2017: a. The current annual Fire Alarm System Inspection and Testing Report in accordance with NFPA 72, was not available for review. b. The current annual Sprinkler System Inspection and Testing Report in accordance with NFPA 25, was not available for review.</p>	C 111		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

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C 133	Continued From page 1	C 133		
C 133	<p>Bathrooms-Hand Grips</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide commodes accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on July 28, 2017: a. Resident Restroom - the commode did not have a hand grip (grab bar).</p>	C 133		
C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, corridors were not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on July 28, 2017: a. Corridor to Back Exit - there is four basket of laundry, decreasing the required six feet wide</p>	C 150		

Division of Health Service Regulation

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C 150	Continued From page 2 corridor to three feet.	C 150		
C 164	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 clean and in good repair. Findings on July 28, 2017: a. Lady's Bathroom- the wall has several missing ceramic tiles. 2. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on July 28, 2017: a. Lady's Bathroom - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint. b. Gentlemen's Bathroom - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 166		

Division of Health Service Regulation

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C 166	<p>Continued From page 3</p> <p>(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:</p> <p>1. Based on Observation, the facility failed to maintain the building free of hazards. Findings on July 28, 2017: a. Bedroom 2 - a ceiling mounted light fixture is not secure to the ceiling.</p> <p>2. Based on Observation, the Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on July 28, 2017: a. Bedroom 2 - a portable medical oxygen cylinder is stored standing up not secured to the structure.</p>	C 166		
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(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.</p> <p>(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.</p> <p>(f) This Rule shall apply to new and existing facilities.</p>	C 185		

Division of Health Service Regulation

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C 185	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 1. Based on Record review and interview with Staff in Charge, fire drill rehearsals are not being done regularly with at least one per shift each quarter. This deficiency affects all by not having trained staff and trained/cooperative residents when there is a need to evacuate the building. Findings on July 28, 2017: <ol style="list-style-type: none"> a. In the 1st quarter for the last 12 months, no rehearsal was performed during 1st or 2nd shift. b. In the 3rd quarter for the last 12 months, no rehearsal was performed during 3rd shift. 2. Based on Record review and interview with Staff in Charge the facility failed to document all aspects of the fire plan rehearsals. Findings on July 28, 2017: <ol style="list-style-type: none"> a. The fire plan rehearsal records included date, time, shift, and staff members present but little to no description of what the rehearsal involved. 	C 185		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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.</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> <ol style="list-style-type: none"> 1. Based on observation, the building's emergency equipment was not maintained in a 	C 189		

Division of Health Service Regulation

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C 189	<p>Continued From page 5</p> <p>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.</p> <p>Findings on July 28, 2017:</p> <p>a. Front Entrance - the exit sign did not illuminate on backup power when tested. Exit signs must work on backup power to provide directions during power outages.</p> <p>b. Corridor to back exit - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed.</p> <p>2. Based on observation, the Building was not maintained in a safe manner by not maintaining a clear unobstructed exit path from the building. This would affect all residents, staff and visitors by obstructing egress during an emergency.</p> <p>Findings on July 28, 2017:</p> <p>a. Back Porch - the Porch bottom step is blocked with vegetation for half of its width.</p> <p>3. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in Room or compartment of origin.</p> <p>Findings on July 28, 2017:</p> <p>a. Manager Bedroom - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>b. Corridor to Back Exit - the exit sign did not completely cover the hole penetrating the fire-resistance-rated ceiling assembly.</p> <p>c. Smoke Barrier Office side - the exit sign did not completely cover the hole penetrating the fire-resistance-rated ceiling assembly.</p> <p>d. Residents Restroom - the fire sprinkler escutcheon plate did not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p>	C 189		

Division of Health Service Regulation

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C 189	<p>Continued From page 6</p> <p>e. Housekeeping Room - the fire sprinkler escutcheon plate had dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>f. Corridor to Back Exit - the fire sprinkler escutcheon plate had dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>g. Bedroom 4 - the fire sprinkler escutcheon plate did not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>h. Corridor near Bedroom 5 - the fire sprinkler escutcheon plate had dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on July 28, 2017: a. Dining Room - one of the 2 x 4 light fixture has a lens not secured to the fixture, exposing unsupported wires and light bulbs.</p> <p>5. Based on observation, the Fire Detection 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 July 28, 2017: a. Bedroom 5 - the smoke detector was chirping, the units signal to change the batteries.</p> <p>6. Based on observations, the Building handrails, and guardrails is not maintained in operating condition. Poor maintenance on safety systems like handrails and guardrails can diminish the intended safety these systems provide.</p>	C 189		

Division of Health Service Regulation

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C 189	<p>Continued From page 7</p> <p>Findings on July 28, 2017:</p> <p>b. Side Exit Ramp - the bottom rail of the handrail/guardrail had dropped down allowing the pickets to become loose.</p> <p>7. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to grow larger.</p> <p>Findings on July 28, 2017:</p> <p>a. Entire Building - since the last annual maintenance, performed in October 2016, there has been no documentation of the portable fire extinguisher's monthly inspections.</p> <p>8. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin.</p> <p>Findings on July 28, 2017:</p> <p>a. Bedroom 5 Window Side - the fire sprinkler head was debris-loaded with lint</p>	C 189		
C 197	<p>General Lighting</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(f) In addition to the required emergency lighting, minimum lighting shall be as follows: (1) 30 foot-candle power for reading; (2) 10 foot-candle power for general lighting; and (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>	C 197		

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C 197	Continued From page 8 1. Based on observation, the facility failed to maintain in a properly operating manner the general illumination of the building. Findings on July 28, 2017: a. Residents Restroom - the four bulb, 2 x 4, fluorescent light fixture has one partially working light bulb. b. Utility Room - there is no working light fixture in this room. c. Gentlemen's Bathroom - the shower light fixture is not working. d. Bedroom 6 - there is 2- four bulb, 2 x 4, fluorescent light fixture but only 3 bulbs are partially working.	C 197		
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) 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	C 199		

Division of Health Service Regulation

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C 199	Continued From page 9 could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on July 28, 2017: a. Lady's Bathroom - the exhaust ventilation system did not work at first then started up and made a loud screeching sound and could not draw any air.	C 199		