

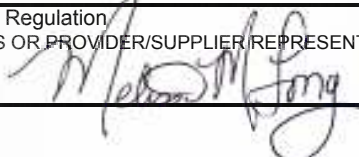
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL029010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/19/2017
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NAME OF PROVIDER OR SUPPLIER GRAYSON CREEK OF WELCOME	STREET ADDRESS, CITY, STATE, ZIP CODE 6781 OLD US HWY 52 LEXINGTON, NC 27295
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Suzanna Fay conducted on July 19, 2017.</p> <p>Records indicate this facility was first licensed on September 9, 2013. The facility is currently licensed for 75 Beds including a 16 Bed Special Care Unit. 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 2009 Edition of the North Carolina Building Code(s), Institutional Occupancy.</p> <p>Deficiencies were cited that require a plan of correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS</p> <p>The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;</p> <p>This Rule is not met as evidenced by:</p>	C 101		

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

 **Administrator** **9/2/2017**

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C 101	Continued From page 1 1. Observations revealed that the facility did not meet the Building Code requirements for special locking in effect at the time of licensure. 1. Findings on July 19, 2017: a. A schematic wiring diagram of the special locking system showing the devices and the location of the electrical power supply was not displayed adjacent to the fire alarm panel.	C 101	In accordance with Building Code Section 407.11-3.3, a schematic wiring diagram of the special locking system has been completed and is placed on the wall in the specified location in glass-front frame.	
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. Observations revealed that the ceilings were not kept in good repair. Findings on July 19, 2017: a. Dining Room - a water leak damaged a section of the ceiling near the side exit and the ceiling finish was split and sagging.	C 164	Water leak was repaired on July 20,2017. Damages to the ceiling were repaired on July 26, 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	C 166		

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C 166	<p>Continued From page 2</p> <p>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 was not maintained free of hazards.</p> <p>Findings on July 19, 2017: a. Life Skills Room - One oxygen cylinder was stored standing upright and without any means of restraint to prevent it from falling over. The cylinder was removed at the time of survey. b. Room 403 - One oxygen cylinder was stored standing upright in the closet without any means of restraint to prevent it from falling over.</p>	C 166	<p>Oxygen cylinders were re-located to an appropriate storage room on July 19, 2017. Staff was instructed on the proper location to store oxygen cylinders.</p>	
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 there is a failure to maintain the building's fire safety equipment systems in a safe condition. Holes or gaps at penetrations in the fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin.</p>	C 189		

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C 189	<p>Continued From page 3</p> <p>Findings on July 19, 2017:</p> <ul style="list-style-type: none"> a. Med Room Bath - the escutcheon plate on the sprinkler head had dropped leaving a gap between the ceiling and the sprinkler pipe. This item was corrected at the time of survey. b. Room 103 - the escutcheon plate on the sprinkler head had dropped leaving a gap between the ceiling and the sprinkler pipe. This item was corrected at the time of survey. c. SCU Living Room - there is a hole at one of the sprinkler heads leaving an opening in the ceiling. d. Electrical Room - there is a small hole at the back of one conduit as it penetrates the ceiling. e. Soiled Linen - there is a hole at the sprinkler head leaving an opening at the ceiling penetration. f. Main Laundry - there is a hole around the sprinkler escutcheon plate over the dryer. <p>2. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not operate properly to provide the required protection function.</p> <p>Findings on July 19, 2017:</p> <ul style="list-style-type: none"> a. The emergency light outside of Room 206 did not operate when tested. b. SCU Laundry - one of the bulbs in the emergency light was burned out. c. Kitchen walk-in freezer - the sprinkler head was blocked by food items. The stored food was relocated during the survey. <p>3. Based on observation there is a failure to maintain the buildings's fire safety components in</p>	C 189	<p>On August 25, 2017, Drywall was repaired to correct the small hole openings and the escutcheon plates were reinstalled in SCU living room, Soiled Linen, and Main Laundry. The small hole at the back of one conduit in the Electrical Room was repaired using fire caulk on August 25, 2017.</p> <p>Emergency lights were replaced on August 2, 2017. Maintenance staff instructed to do monthly check on all emergency lights to ensure proper operation.</p> <p>Kitchen staff was made aware of the importance of not blocking the sprinkler heads in the cooler and freezer.</p>	

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C 189	<p>Continued From page 4</p> <p>a safe operating condition. Any unapproved device that is used to keep a door open is an impediment to quickly closing a door to aid in containing smoke and/or fire. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin.</p> <p>Findings on July 19, 2017:</p> <p>a. Kitchen - one of the doors to the dining room was held open with a wedge. The wedge was removed at the time of survey.</p> <p>b. Sunroom - the active leaf of the door was held open with a wedge. The wedge was removed at the time of survey.</p>	C 189	<p>On July 19, 2017, staff was instructed not to use wedges to hold open doors in any areas. Supervisors will monitor to ensure compliance.</p>	
C 199	<p>Exhaust Ventilation</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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:</p> <p>(1) soiled linen storage;</p> <p>(2) soil utility room;</p> <p>(3) bathrooms and toilet rooms;</p> <p>(4) housekeeping closets; and</p> <p>(5) laundry area.</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 exhaust ventilation system was not maintained to insure that it</p>	C 199		

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C 199	Continued From page 5 operates at a rate of two cubic feet per minute per square foot. Findings on July 19, 2017: a. There was a pattern of bathroom exhaust fans that had an accumulation of dust. The dust can block the air flow for the fans.	C 199	All Bathroom exhaust grills were cleared of dust on July 21, 2017. Maintenance staff instructed to perform monthly checks to ensure proper operation and to clear dust from exhaust fan units.	