

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HAL009025	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  02/13/2018
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NAME OF PROVIDER OR SUPPLIER  
**WEST BLADEN ASSISTED LIVING**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**714 BLADEN STREET  
BLADENBORO, NC 28320**

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C 000	Initial Comments  Report of Biennial Construction Survey by Suzanna Fay and Ed Miller on February 13, 2018.  Records indicate that this facility was first licensed as a Home for the Aged on January 13, 1986. The facility is currently licensed for a capacity of 60 licensed beds including a 26 bed Special Care Unit. Therefore, this facility was inspected for conformance with the 1984 Rules for the Homes for the Aged and Disabled, the applicable components of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1978 (with revisions) North Carolina State Building Code: Group I - Institutional Unrestrained Occupancy.  Deficiencies have been cited and a Plan of Correction is required.	C 000		
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 walls were not maintained in good repair.  Findings on February 13, 2018: a. Bath between Room 216 and 218 - the drywall behind the toilet and sink had been patched but	C 164		

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

STATE FORM

TITLE

*Administrative*

(X6) DATE

3-26-18

08WT21

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C 164	Continued From page 1 not painted.	C 164	to be fixed and repaired by 3/30/18	
	b. 211 Bath - the flange for the sink piping was missing leaving a hole in the wall at the pipe penetration.		to be fixed and repaired by 3/30/18	
	c. Employee lounge - the outlet along the back wall was missing a cover plate. The plate was installed at the time of survey.		Plate has been installed	
	2. Observations revealed that the facility was not maintained free of unpleasant odors.  Findings on February 13, 2018: a. Room 211 bath - there was a strong unpleasant odor.		unpleasant order has been resolved. It was due to resident use at prior of us going in	
	3. Observations revealed that the floors and ceilings were not kept in good repair.  Findings on February 13, 2018: a. 101 Bath - the vinyl floor had separated at the seam and was patched with a clear tape.		to be fixed and repaired by 3/30/18	
	b. Room 101 - the ceiling has some areas of damage where the popcorn finish is cracked and flaking.		to be repaired by 3/30/18	
	c. 100 Hall - there was a pattern of damaged ceiling where the popcorn finish is cracked and flaking.		to be repaired by 3/30/18	
	d. Laundry room - there is a sink and countertop attached to the wall at the window. The countertop is loose and appears to be in danger of falling. The walls and window trim around the window AC unit are dirty and mildewing due to condensation from the AC unit. The padding/insulation material for the unit is covered in lint.		to be fix and repaired by 3/30/18	
	e. Riser room - a prior leak has left mildew stains on the back wall of the riser room.		has been fixed	

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C 166	Continued From page 2	C 166		
C 166	Housekeeping-Maintained Free of Hazards	C 166		
	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 facility was not maintained free from hazards. Oxygen bottles that are improperly stored may present a danger to the occupants of the facility.  Findings on February 13, 2018: a. 200 Hall storage - five oxygen tanks were stored unsecured.		Oxygen tanks are stored properly.	
	b. SCU storage - one unsecured oxygen tank was found in the storage room.		Oxygen tanks are stored properly	
	2. Based on observation, the facility was not maintained free of hazards. Doors that are difficult to open could endanger a resident if they became trapped in their rooms during a fire or other emergency.  Findings on February 13, 2018: a. Room 203 - the door hardware was loose making the door difficult to open.		door hardware has been replaced	
	3. Based on observation the facility is not maintained free from hazards if the code required clearance of 36" in front of electrical breaker panels is not maintained.  Findings on February 13, 2018:		clearance in front of electrical breakers panels have be corrected	

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C 166	Continued From page 3 a. Exterior Electrical room - the electrical panels were blocked by equipment, materials and boxes.  4. Based on observation there is a failure to maintain the facility free from hazards. Means of egress or exit paths must not be obstructed, blocked or have their required width encroached upon. This could delay or hinder evacuation of the occupants from the facility in the event of an emergency.  Findings on February 13, 2018: a. Employee break area - the configuration of the tables and furnishings restrict the egress path.	C 166	All equipment, materials and boxes have been moved	
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 logs for the fire rehearsals did not follow the requirements of the licensure rules.  Findings on February 13, 2018:	C 185	All Fire drills will have required information	

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C 185 Continued From page 4  
 a. The records did not include the staff members present.  
 b. The records did not provide a short description of what the rehearsal involved.

C 185

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.

C 189

This Rule is not met as evidenced by:  
 1. 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.

Findings on February 13, 2018:  
 a. The emergency light in the foyer did not illuminate when tested on battery backup.  
 b. The emergency light at the nurses station did not illuminate when tested on battery backup.  
 c. The emergency light beside Room 211 did not illuminate when tested on battery backup.  
 d. The emergency light outside of the TV room did not illuminate when tested on battery backup.

2. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near

*has been repaired*  
~~*has been repaired*~~  
~~*will be fixed or repaired by 3/30/18*~~  
~~*has been repaired*~~

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C 189	Continued From page 5 water sources do not function to provide shock protection.  Findings on February 13, 2018: a. Room 201 - the reset button on the bath GFCI receptacle was damaged. b. Room 203 - the reset button on the bath GFCI receptacle was damaged. c. Bathroom between 216 and 218 - the GFCI outlet did not trip when tested. d. Room 211 - the bathroom GFCI outlet did not trip when tested.	C 189	Have been replaced GFCI has been replaced GFCI has been replaced GFCI has been replaced	
	3. 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 function as it is designed.  Findings on February 13, 2018: a. 200 Hall - there is a pattern of sprinkler heads being taped up in the closets to protect them from paint. The tape was not removed when the painting was completed. b. Room 205 - items were stored within 18" of the sprinkler head in the left closet. c. Room 207 - items were stored within 18" of the sprinkler head in the closet. d. Activity closet - a cardboard box was stored within 18" of the sprinkler head. The box was removed at the time of survey.		All sprinkler heads have been checked and tape removed. Items taken out Items taken out Items taken out	
	4. Based on observation there is a failure to maintain plumbing equipment in a safe manner. Failure to maintain plumbing equipment in a safe manner could cause injury to residents if the toilet was not secure.  Findings on February 13, 2018:			

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C 189	Continued From page 6	C 189		
	a. Bath between Rooms 216 and 218 - the toilet was loose.		to be fixed or repaired by 3/30/18	
	5. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin.  Findings on February 13, 2018: a. 200 Hall - both bathrooms' corridor doors were propped open with unapproved devices. b. SCU Dining - the door was held open with a rubber wedge. c. The attic access door outside of the AL dining room was being held open with a strap to vent the attic.		Has been removed  Has been removed Has been fix	
	6. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops.  Findings on February 13, 2018: a. 200 Hall last bathroom - there is a gap along the top left edge of the corridor door that exceeds the minimum allowed.		To be fixed or repaired by 3/30/18	
	7. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings or walls could allow fire and smoke to spread beyond the area of origin.  Findings on February 13, 2018:			

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C 189	<p>Continued From page 7</p> <p>a. Main Electrical room - two fire resistant chases were constructed in the room. The corners of the chases have not been taped and mudded.</p> <p>b. Exterior Electrical room - one of the telephone wiring sleeves was open and did not have fire caulk.</p> <p>c. Exterior Electrical room - a section of the fire resistance rated ceiling, approximately 4'x6' was patched using a large sheet of plywood which does not maintain the fire rating and there is an gap between the wall and the plywood was installed.</p> <p>d. Employee lounge - the caulking was falling out around one of the sprinkler heads over the seating area leaving a small gap in the rated ceiling assembly.</p> <p>8. Based on Observations, the facility failed to maintain electrical equipment in a safe condition. Equipment and accessories should be plugged directly into the outlet or into an approved UL power source with an on/off switch. This poses a safety hazard to the residents, staff and visitors.</p> <p>Findings on February 13, 2018: a. SCU Med Room - an extension chord was plugged into a power strip. b. Laundry Room - a radio chord was plugged into an extension chord.</p> <p>9. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin.</p> <p>Findings on February 13, 2018:</p>	C 189	<p>To be fixed or repaired by 3/30/18</p> <p>to be fixed or repaired by 3/30/18</p> <p>To be fixed or repaired by 3/30/18</p> <p>Has been fixed</p> <p>extension chord taken out.</p> <p>extension chord taken out</p>	



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C 189	Continued From page 8 a. 100 Hall, Left bath - the catch plate is taped to prevent the door from latching. b. Room 105 - the door does not latch.  10. Observations revealed that the facility does not meet the minimum NCSBC requirements at the time of alteration. Improper building materials compromise the fire rating assembly.  Findings on February 13, 2018: a. Exterior Electrical room - a section of the rated ceiling, approximately 4'x6' was patched using a large sheet of plywood which is a combustible material.	C 189	tape has been removed  to be fixed or repaired by 3/30/18  to be repaired by 3/30/18
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. Observations revealed that the facility did not provide exhaust ventilation at the rate of two	C 199	to be repaired by 3/30/18

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C 199	Continued From page 9  cubic feet per minute per square foot in required areas.  Findings on February 13, 2018: a. Main Electrical room - the exhaust fan is not working. b. SCU Room 113 - the fan unit was not secure to the ceiling. c. Staff baths (both men and women) - the exhaust fans were not working. d. SCU Storage - the exhaust fan is not working. e. Laundry room - an exhaust fan or natural ventilation could not be located in the laundry area. f. Women's bath near laundry - the exhaust fan is not working.	C 199	to be repaired by 3/30/18  Fixed Fixed to be repaired by 3/30/18  Fixed	