

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL081051	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/06/2018
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NAME OF PROVIDER OR SUPPLIER NANAS ASSISTED LIVING FACILITY # 2	STREET ADDRESS, CITY, STATE, ZIP CODE 2270 OAKLAND ROAD FOREST CITY, NC 28043
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on March 6, 2018. Records indicate that this facility was first licensed on June 1, 1968 for 44 residents. Based on this information, we are requiring the facility to meet the 1967 Edition of the North Carolina State Building Code, the 1971 Rules for the Licensing of Adult Care Homes, and the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds.	C 000		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (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; This Rule is not met as evidenced by: 1. Observations revealed that hand grips were not installed at all commodes, tubs and showers used by or accessible to residents. Findings on March 6, 2018: a. Bath across from laundry - there was not a hand grip for the toilet.	C 133	<i>Hand Grips were bought & placed on toilet</i>	<i>5/18/18</i>
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are:	C 160		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Alana Fisher* TITLE: *Owner* (X6) DATE: *4/22/18*

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NAME OF PROVIDER OR SUPPLIER
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STREET ADDRESS, CITY, STATE, ZIP CODE
**2270 OAKLAND ROAD
FOREST CITY, NC 28043**

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C 160	Continued From page 1 (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the exterior of the facility is not maintained in a clean and safe condition. Findings on March 6, 2018: a. The roof on the kitchen porch has rotted and deteriorated. There are large holes in the roof and the roof is beginning to collapse. b. Exit by Room 2 - a section of the exterior fascia trim at the left of the door has dry rotted and is falling off. c. Exterior facade at exit by Room 2 - the paint is flaking and falling off of the concrete block walls. The paint on the siding is cracked and flaking. d. Front elevation - a section of the trim has fallen off to the left of the fire wall. The exposed wood has not been painted and finished. e. Grounds outside of kitchen area - there are power chords strung across the ground that are a tripping hazard. Interview with staff revealed that these were there for the pump and were installed during repairs.	C 160	<i>The whole roof will be repaired & replaced on porch. Exit by Room 2 Fascia trim has been repaired The Block wall has been painted & repaired Exposed wood has been painted and finish Power chords have been removed</i>	<i>6/18/18 5/18/18 6/18/18 5/18/18 5/18/18</i>
C 162	Outside Premises-Outdoor Lighting SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (3) Outdoor walkways and drives shall be illuminated by no less than five foot-candles of light at ground level.	C 162		

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C 162	Continued From page 2 This Rule is not met as evidenced by: 1. Observations revealed that the outdoor walkways were not illuminated. Findings on March 6, 2018: a. Exit by Room 27 - the exterior porch light was out. b. Exit by Room 2 - none of the exterior lights had bulbs.	C 162	<i>Room 27 exterior porch light has been repaired & replaced.</i>	<i>5/18/18 5/18/18</i>
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 facility did not have walls, ceilings and floors kept clean and in good repair. Findings on March 6, 2018: a. Room 20 - the ceiling around the fan had a heavy accumulation of dust. b. There is a pattern of damaged metal door frames in the resident bathrooms. The frames are rusting and deteriorating along the bottom in the half baths between rooms at the back hall. c. Room 20 bath - the vinyl tile floor is heavily stained around the toilet and along the perimeter of the walls. d. Room 20 - the VCT is cracked and broken at	C 164	<i>Room 2 bulbs has been put in exterior lights</i> <i>Room 20 ceiling fan has been cleaned.</i> <i>Metal door frames have been repaired & replaced in resident bathrooms</i> <i>Room 20 tiles have been replaced</i> <i>Room 20 VCT has been repaired & replaced</i>	<i>5/18/18</i> <i>5/18/18</i> <i>5/18/18</i>

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C 164	Continued From page 3 the threshold to the bathroom. e. Room 28 - both of the sliding closet doors have holes with rough, splintered edges. f. Room 28 - the finish on the wall beside the toilet is bubbled and flaking. g. Sea Crest Shower Room - the walls around the toilet are stained and the finish is bubbled and flaking. h. Sea Crest Shower Room - the adhesive on the wallpaper border is failing and the border is curling along the edges and at the seams. i. Room 11 - the closet door has a hole leaving rough splintered edges that can cause injury. j. Bath across from laundry - the ceiling at the shower is stained with mildew and the finish is patchy. Interview with staff revealed that the bathroom had some damage from leaks. The leaks were repaired and they were in the process of repairing the ceiling. k. Bath across from laundry - the shower is dirty. Interview with staff revealed the dirt is from the repairs. l. Dining room exit - the door frame and the wall at the frame is damaged. Part of the trim is broken off. 2. Observations revealed that the facility did not maintain furnishings in good repair. Findings on March 6, 2018: a. Room 11 - the bed frame on the bed nearest the door is not secure to the rails and the frame moves easily to the touch. 3. Observations revealed that the kitchen walls and cabinets are not maintained in good repair. Findings on March 6, 2018: a. At the time of survey, part of the kitchen cabinetry has been removed leaving the walls	C 164	Room 28 closet doors have been repaired Room 28 the wall beside the toilet has been repaired Shower Room has been Painted. Room 11 the closet door has been repaired Ceiling has been repaired & painted Bath has been cleaned Dining Room Exit Door has been repaired Room 11 Bed Frame is secure on bed Kitchen Walls have been painted and cabinets are where removed	5/18/18 5/18/18 5/18/18 5/18/18 5/18/18 5/18/18 5/18/18 5/18/18

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C 164	Continued From page 4 behind in disrepair. Interview with staff revealed that they were in the process of replacing all of the old wood cabinetry with stainless steel per the most recent sanitation inspection.	C 164	Walls have been repaired & painted.	5/18/18
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. Observations revealed that the facility was not maintained free of all hazards. Loose rails and hand grips could cause injury to the residents if they moved or failed to support the weight of the person using the handrail. Findings on March 6, 2018: a. Room 28 toilet room - the handrail for the toilet is loose. 2. Observations revealed that the facility was not maintained free of all hazards. Broken glass or mirrors create sharp edges that can cause injury. Findings on March 6, 2018: a. Dining room - the wall mirror has a large crack at the bottom corner near the kitchen. 3. Based on observation the facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without	C 166	Loose Rails and Hand Grip have been repaired Room 28 the hand rails have also been repaired Dining Room mirror has also been repaired Oxygen bottles has been pick up and sent back to pharmacy	5/18/18 5/18/18 5/18/18

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C 166	Continued From page 5 any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on March 6, 2018: a. Oxygen storage - there were several oxygen tanks that had been knocked over and were laying on the floor.	C 166	Oxygen tanks have been removed	5/18/18
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 facility is not conducting fire rehearsals on each shift per quarter. Findings on March 6, 2018: a. Records revealed that the facility did not conduct a fire rehearsal on the 1st shift during the third quarter of 2017. b. Records revealed that the facility did not conduct a fire rehearsal on the 2nd shift during the fourth quarter of 2017.	C 185	Yes, We did do the Fire rehearsals you saw them when you were here. Facility do and will conduct Fire rehearsals on each shift per quarter	5/19/18

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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> <p>1. Observations revealed that the building was not maintained in a safe and operating condition. Broken exit hardware affects the safety of the residents, staff and visitors if they have difficulty entering or exiting the facility.</p> <p>Findings on March 6, 2018:</p> <p>a. Exit by Room 27 - the door handle on the exterior of the door was broken off.</p> <p>b. Dining room exit door - the door is extremely difficult to open. The door has to be lifted in order to open.</p> <p>c. Exit by Room 2 - the door handle on the exterior of the door was broken off.</p> <p>2. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection.</p> <p>Findings on March 6, 2018:</p> <p>a. The fire extinguishers are not being inspected on a monthly basis to insure that they are</p>	C 189	<p>Exit Room 27 the door handle was repaired & fixed 5/10/18</p> <p>Dining Room exit door has been repaired & fixed 5/10/18</p> <p>Room 2 the door handle was repaired & fixed 5/10/18</p> <p>Fire Extinguishers will be inspected on a monthly basis to ensure operational 5/10/18</p>	
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C 189	<p>Continued From page 7</p> <p>operational.</p> <p>b. The magnet holding the fire doors open is loose and no longer secure to the wall.</p> <p>3. 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 could allow fire and smoke to spread beyond the area of origin.</p> <p>Findings on March 6, 2018:</p> <p>a. There is a hole at the conduit penetration in the corridor ceiling outside of Room 19 which compromises the fire rated ceiling assembly.</p> <p>b. Room 11 - there is a conduit penetration in the closet leaving a gap in the fire rated ceiling assembly.</p> <p>c. Bath across from laundry - the fire caulk around the plumbing line penetration has fallen out leaving a gap in the fire rated ceiling assembly.</p> <p>d. Room 5 - there is a conduit penetration in the closet leaving a gap in the fire rated ceiling assembly.</p> <p>4. Observations revealed that the plumbing equipment is not maintained in a safe and operating condition.</p> <p>Findings on March 6, 2018:</p> <p>a. Sea Crest Shower Room - the toilet seat was very loose. The seat was secured at the time of survey.</p> <p>b. Sea Crest Shower Room - the lid to the toilet tank was too small to cover the tank.</p> <p>c. Bath across from laundry - the toilet seat is sized incorrectly for the toilet base.</p> <p>d. Room 5 - one of the screws is missing from the toilet seat making it unsafe to use.</p>	C 189	<p>Magnet holding the fire door has been repaired and fixed 5/18/18</p> <p>Room 19 the hold has been repaired 5/18/18</p> <p>Room 11 has also been repaired 5/18/18</p> <p>Bath Room has also been repaired & fixed 5/18/18</p> <p>Room 5 has been repaired and fixed 5/18/18</p> <p>Toilet Seat has been repaired 5/18/18</p> <p>Lid has been bought & placed over toilet 5/18/18</p> <p>Toilet Seat has been replaced 5/18/18</p> <p>Room 5 Toilet Seat has been replaced 5/18/18</p>	

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C 189	Continued From page 8 e. Basement - the drain trough for the washing equipment is backed up and the trough is full of water. There is an unpleasant smell in the basement. Interview with staff revealed that they had some clogged lines and were completing the repairs. 5. 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. Findings on March 6, 2018: a. Room 11 - the door is catching at the latch and is difficult to close. b. Bath across from laundry - the door drags and is difficult to close. The door does not latch when closed. c. Clean linen - the hinge on the door is heavily damaged making the door difficult to operate. d. Salon - the door to the salon has a large section of the veneer broken off at the bottom right and the door does not close and latch. 6. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be effected if the equipment failed to alert the occupants in case of a fire. Findings on March 6, 2018: a. The smoke detection device in the open dining area has been removed from the base. 7. Based on observation electrical equipment has not been maintained in a safe manner.	C 189	The drain trough has been repaired & fixed. Room 11 door is repaired Door has been repaired Door has been repaired Clean linen Door has been repaired in salon A - Repair Smoke detector has been put up in dining area	6/18/18 5/18/18 6/10/18 6/10/18 6/10/18 5/18/18

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C 189	<p>Continued From page 9</p> <p>Failure to maintain electrical equipment in a safe manner could effect the safety of person exposed to the unsafe condition.</p> <p>Findings on March 6, 2018: a. Room 5 - the wall mounted electrical outlet is loose.</p>	C 189	<p>Room 5 Electrical outlet has been repaired & fixed 5/10/18</p> <p>Manager and Ste will make a daily walk thru to ensure all rules areas are met 5/10/18</p>	
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Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				<u>Digital Fax</u>		
Apr 24	2:54PM	Fax Sent	19197336592	7:16 N/A	14	OK