

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL002003	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/19/2018
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NAME OF PROVIDER OR SUPPLIER TAYLORSVILLE HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 350 SCHOOL DRIVE TAYLORSVILLE, NC 28681
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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
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C 000	Initial Comments Report of Construction Section Biennial Survey by Dennis Harrell on 4-19-2018. Records indicate this facility was first licensed on 11-26-1997, as a Special Care facility for 60 residents. Based on this information, the facility is required to meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 Edition of the North Carolina State Building Code-Volume I-General Construction Section 409 Institutional Occupancies.	C 000		
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: Based on observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: Several (5) portable medical oxygen cylinders were stored in an unapproved plastic crate.	C 166	4-2-2018 Unapproved plastic crate was removed from building and oxygen cylinders were secured in metal holders. Cylinders are not stored in any other areas in building. Housekeeping have added oxygen cylinder checks to checklist and will monitor that cylinders are being stored in secured metal holders weekly. See attachment A: Housekeeping Checklist	

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

Sign W. Mekeal

TITLE

Executive Director

(X6) DATE

5-9-18

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C 185 Continued From page 1

C 185

C 185 Fire Safety-Rehearsals on Each Shift

C 185

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:
Based on a review of documents, the records available onsite included no description of what the rehearsal involved.

Fire Rehearsal was executed on 4-19-2018 while surveyor was onsite and description was approved with corrections in fire simulation location, staff response and duration of drill.
Discription list has been added to the Fire Rehearsal Manual on 4-20-2018 to assure discriptions will continue to be accurate.

C 189 Building Equipment Maintained Safe, Operating

C 189

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.

This Rule is not met as evidenced by:
1. Based on observation, corridor doors are

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C 189	<p>Continued From page 2</p> <p>prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include;</p> <p>a. There was a mechanical kick-down being used to hold open the med room door. b. The door to room 309 dragged and was difficult to close and open.</p> <p>2. Based on observation the required one-hour fire rated ceilings were compromised in locations because of sprinkler escutcheons missing or not tightly fitted to the ceiling. Sprinkler escutcheons that are not properly mounted present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Improperly mounted escutcheons were found in:</p> <p>a. Administrator's office, Private Dining room.</p> <p>3. Based on observation, the battery powered emergency light in the laundry would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff.</p> <p>4. Based on observation, the facility failed to be maintained in a safe condition because of an exit sign not working properly. Malfunctioning exit signs could delay or prevent an evacuation in an emergency. Finding includes: The exit sign in the Dining room did not work on battery when tested.</p> <p>5. Based on observation, the roof cap on the exhaust vent from the commercial clothes dryers</p>	C 189	<p>Mechanical kickdown on medicine room door was removed on 4-27-2018. Maintenance will check all corridor doors monthly to assure proper closure and latch. Attachment B: Maintenance Checklist</p> <p>4-30-2018 Sprinkler Escutcheons were caulked in Administrators Office and Private Dining Room. All other Sprinkler Escutcheons in building were checked for proper mounting. Maintenance will be monitoring these monthly to assure they are properly mounted flush with ceilings. Monitoring has been added to Maintenance Checklist. Attachment B: Maintenance Checklist</p> <p>5-7-2018 Emergency Light in Laundry has been repaired and has been added to the Maintenance Checklist to be checked monthly with all Exit and Emergency Lighting. All Emergency Lights and Exit Lights and batteries have been checked and will be monitored by Maintenance. Attachment B: Maintenance Checklist</p> <p>4-25-2018 Battery was replaced in the Exit Sign in the Dining Room. All Exit Signs were checked in building and All Exit Signs and Emergency Lighting will be monitored monthly by Maintenance Attachment B: Maintenance Checklist</p>	
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C 189	Continued From page 3 was significantly clogged with lint. Clogged dryer exhaust and cause a fire.	C 189	4-19-2018 Exhaust Vent Roof Cap was removed and vent was cleaned from clogged lint. Housekeeping will monitor vent and roof cap weekly for lint build-up and will notify Maintenance for cleaning. Attachment A	
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: Based on observation the facility failed to maintain required exhaust in a working condition. Findings include; a. The exhaust provided was not working in the bathroom off bedroom 305. b. The exhaust provided was not working in the bathroom off bedroom 404.	C 199	Facility 360 Services inspection on 4-20-18 revealed exhaust in baths in rooms 305 and 404 needed repairs. We are currently waiting for a quote for repairs and would ask for a 30 day extension for all repairs to be complete. Date of completion no later than June11, 2018.	

Attachment A
2 pages

Date:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Restroom 1 & 2:							
Toilet Sanitized							
Sink Sanitized							
Floor Cleaned							
Trash Cans Cleaned							
Supplies replaced							
Lights							
Leakes							
Breakroom:							
Table Sanitized							
Trash Cans Cleaned							
Floors Cleaned							
Lights							
Leakes							
TV Room:							
Wipe Chairs							
Wipe Tables							
Vacuum Floor							
Lights							
Leakes							
Porches: Outside Areas							
Sweep							
Empty Ashtrays							
Sweep Down Cobwebs							
Trash pickup							
Lights							
Leakes							
Halls:							
Vacuum							
Sanitize Handrails							
Lights							
Leakes							
Private Dinning Room:							
Vacuum							
Shampoo Any Spots							
Empty Trash							
Lights							
Leakes							
Activity Kitchen:							
Vacuum							
Empty Trash							
Supplies Replaced							
Sink Sanitized							
Lights							
Leakes							

Oxygen Cylinders / Metal Holders							
Exhaust Vents Free Of Buildup							
Soiled Linen Room Cleaned							
Living Room							
Vaccum							
Dust							
Sweep							
Mop							

Notes:



Weekly Maintenance

Mag Lock Exterior Doors				
Vent Monitor Lent Build UP				
Roof Cap Monitor Lent Build Up				
Water Temp Checked				

Notes:

Monthly Maintenance Log

Fire Extinguishers				
Exit Signs				
Emergency Lighting				
Corridor Doors Closing Completely				
Corridor Doors Closing Quickly				
Corridor Doors Latching & Locking				
Sprinkler Escutcheons Proper Mounting				

Notes: