

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL001134	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/02/2018
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NAME OF PROVIDER OR SUPPLIER THE OAKS OF ALAMANCE	STREET ADDRESS, CITY, STATE, ZIP CODE 1670 WESTBROOK AVENUE BURLINGTON, NC 27215
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey conducted by Suzanna Fay and Dennis Harrell on August 2, 2018.</p> <p>Records indicate that this facility was first licensed November 13, 1991 for Sixty-Nine (69) Beds. Based on this information, the facility is required to meet the 1991 Homes for the Aged-Minimum and Desired Standards and Regulations; applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds; and the 1991 North Carolina State Building Code, Section 409.1- Institutional (I) Occupancy.</p> <p>Deficiencies were noted which require a Plan of Correction.</p>	C 000		
C 140	<p>Linen Storage-Separate Clean & Soiled</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(f) The requirements for storage rooms and closets are:</p> <p>(2) Linen Storage. Storage areas shall be adequate in size and number for separate storage of clean linens and separate storage of soiled linens. Access to soiled linen storage shall be from a corridor or laundry room;</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that soiled linens were not kept separate from clean linens.</p> <p>Findings on August 2, 2018:</p> <p>a. Laundry - several open tubs of soiled linens were on the floor of the laundry room. The door to the Clean Linen room was open.</p>	C 140	Linen Storage to return to the room labeled "soiled Linen" by 10/15/2018	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

C. J. Kelly 80 8/3/18

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C 160	Continued From page 1	C 160		
C 160	<p>Outside Premises-Clean, Safe</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;</p> <p>This Rule is not met as evidenced by: 1. Observations revealed that the outside premises are not maintained in a clean and safe condition.</p> <p>Findings on August 2, 2018: a. There is a large section of rotten fascia trim outside of the Exit by Room 126. b. Smoking Porch - the porch soffit is soft and deteriorating at the edge beside the A/C units. c. The gutters outside of the dining room are completely clogged with pine needles.</p>	C 160		
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. Observations revealed that the walls and</p>	C 164	<p>Fascia listed for A and B to be repaired by 10/15/2018</p> <p>Gutters have been cleaned out as listed in C</p>	

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C 164	Continued From page 3 a. Exit lobby across from Activity - the flooring on either side of the door is peeling up.	C 164	Flooring listed in A to be repaired by 10/15/2018	
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 hazards. Findings on August 2, 2018: a. Oxygen Supply Closet - nine oxygen tanks were sitting on the floor, unsecured in the room.	C 166		
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. This Rule is not met as evidenced by: 1. Based on observation there is a failure to	C 189		Oxygen room to be placed in proper containers by 9/14/2018

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C 189	<p>Continued From page 4</p> <p>maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. 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 August 2, 2018:</p> <ul style="list-style-type: none"> a. Med Room - the corridor door was propped open with a trash can. This deficiency was corrected at the time of survey. b. Library - one of the door leafs was blocked from closing with a table and chairs. c. Room 108 - the corridor door was propped open using a wedge. d. Living Room - the corridor doors were propped open with furniture and did not close during the fire alarm test. e. Room 226 - the door was held open using a wedge. <p>2. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failing to provide a minimum of 18" clearance below the ceiling may not allow for the fire safety equipment to operate properly during a fire or other emergency.</p> <p>Findings on August 2, 2018:</p> <ul style="list-style-type: none"> a. Clean Linen - blankets and rugs were stored to within 4" of the ceiling. b. 100 Hall Housekeeping Closet - items are stored within 2" of the ceiling. c. Biomedical Room - items are stored with 4" of the ceiling. d. Activity Closet - items were stored within 18" of the ceiling. <p>3. Based on observation there is a failure to</p>	C 189	<p>Wedges removed from areas A-E immediately after survey</p> <p>Areas A-D to be cleaned out and away from the ceiling by 10/15/2018</p>	

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C 189	<p>Continued From page 5</p> <p>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 August 2, 2018:</p> <ul style="list-style-type: none"> a. Clean Linen - the escutcheon plate on the sprinkler head has dropped leaving a gap in the fire rated ceiling assembly. The ceiling has some staining and some minor damage. b. Soiled Linen (now maintenance) - there is an abandoned fan box in the ceiling. Verify that the one hour ceiling assembly has not been compromised. c. Laundry - the cover plate for the sprinkler head is missing at the head near the corridor door. d. Corridor outside of Room 126 - there is a small hole in the ceiling at the Exit sign. e. Beauty Salon - there are two unsealed penetrations in the ceiling. f. Staff Lounge - there is one unsealed 1" diameter penetration. There is a large hole around the smoke detector. g. Riser Room - the ceiling is damaged and stained and there is a gap around the mechanical flue. There is a 1" diameter hole in the ceiling behind the riser. There is a gap in the ceiling around the water heater flue as well. h. Activity Closet - the sprinkler head has dropped leaving a gap in the ceiling. i. Activity Office Closet - the escutcheon plate is missing. j. 200 Hall Activity Room - there is a large hole in the ceiling near the entry doors where the sprinkler head has shifted. k. Administrator's Closet - there is a small hole in the ceiling above the door. l. Front portico - one of the sprinkler heads has dropped leaving a hole in the ceiling. 	C 189	<p>Areas A-I to be repaired by 10/15/2018. B to be verified that there is no compromise</p>	
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C 189	<p>Continued From page 6</p> <p>4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.</p> <p>Findings on August 2, 2018:</p> <p>a. The Exit sign at the cross corridor door outside of Room 110 did not illuminate on test.</p> <p>5. 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.</p> <p>Findings on August 2, 2018:</p> <p>a. The exterior emergency light outside of Room 218 did not illuminate when tested.</p> <p>b. The emergency can lights in the 100 hall did not illuminate when tested. The battery pack is located in the hall closet by Room 126.</p> <p>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 holes in the door or gaps between the door and the door frame stops.</p> <p>Findings on August 2, 2018:</p> <p>a. 100 Hall Housekeeping Closet - there is a hole in the door at the door hardware.</p> <p>b. 100 Hall left Housekeeping Closet - there is a hole in the door at the door hardware.</p> <p>c. Room 107 - there is a hole in the door at the door hardware.</p> <p>d. Room 224 - there is a hole in the door at the</p>	C 189	<p>Exit listed as A has been repaired</p> <p>Exterior Emergency lights listed as A and B have been repaired</p> <p>Areas A-D will be repaired by 10/15/2018</p>	

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C 189	<p>Continued From page 7</p> <p>door hardware.</p> <p>7. Observations revealed that the plumbing equipment is not maintained in a safe and operating condition. This could expose occupants to sewer gasses. Findings on August 2, 2018: a. Biomedical Room - the hopper is being used for storage and the water seal is dry. b. Lobby - the electric water cooler has been removed and the drain has not been properly sealed. c. Guest bathroom - the urinal has been sealed off behind a partition wall and is no longer being used allowing the water seal to dry out.</p> <p>8. Observations revealed that the mechanical equipment is not maintained in operating condition. Findings on August 2, 2018: a. Exterior mechanical room - several of the pipes behind the mechanical equipment are freezing up. b. 200 Hall Mechanical Room (by Room 230) - the sampling tube in the duct is dirty.</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. Findings on August 2, 2018: a. Kitchen - the door to dining does not latch. b. Room 222 - the door does not close and latch.</p> <p>10. Based on observation the electrical</p>	C 189	<p>Areas A to be cleared out and repaired. B is to be sealed properly and C is to be repaired. <i>by 10/15/18</i></p> <p>Equipment A is to be looked at by a repairman, and B will be cleaned out by 10/15/2018</p> <p>Kitchen door and room 222 to be repaired by 10/15/2018</p>	

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C 189	<p>Continued From page 8</p> <p>equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection.</p> <p>Findings on August 2, 2018: a. Dining Room - neither of the two outlets at the serving counter tripped when tested with a GFCI tester.</p> <p>11. Observations revealed that the fire safety equipment is not maintained in a safe and operating condition.</p> <p>Findings on August 2, 2018: a. Beauty Salon - the wall magnetic hold open device is not secure and is pulling away from the wall.</p> <p>12. Observations revealed that the electrical equipment is not maintained in a safe and operating manner.</p> <p>Findings on August 2, 2018: a. Riser Room - the electric heater is falling off of the wall.</p> <p>13. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin.</p> <p>Findings on August 2, 2018: a. At the cross corridor fire doors by Room 217, the outgoing leaf did not latch during the fire alarm test.</p>	C 189	<p>Dining room outlet to be changed to GFCI by 10/15/2018</p> <p>Magnetic to secured to the wall by 10/15/2018</p> <p>Riser room heater to be secured to the wall by 10/15/2018</p> <p>Corridor fire door leaf to be repaired by 10/15/2018</p>	

A handwritten signature in black ink, followed by the date '9/3/18'.