

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 R 09/25/2018
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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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(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
{C 000}	Initial Comments Report of Biennial Follow Up Construction Survey by Ed Miller on 9-25-2018. Several deficiencies were not corrected. Further action is required.	{C 000}		
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and This Rule is not met as evidenced by: 1. Based on observation, the building did not provide exit door locks that are easily operable, by a single hand motion, from the inside at all times without keys. This would affect residents, staff, and visitors by requiring more time to exit the building during an emergency. New Finding on September 25, 2018: a. Exit by Room 2 - the replacement door handle has a thumb turn that must to be operated before the door handle would release the door.	C 153		
{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	{C 164}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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{C 164}	<p>Continued From page 1</p> <p>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 facility did not have walls, ceilings and floors kept clean and in good repair.</p> <p>Findings on 9-25-2018: b. The report from the 3/6/2018 Biennial Survey revealed: 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. On 9/25/2018, the follow-up Survey revealed no work had been completed. A telephone conversation with Administration revealed that the replacement parts had not arrived. c. Room 20 bath - on 9/25/2018, the follow-up Survey revealed that vinyl floor tiles had been installed with unacceptable large joints between tile, making floor cleaning very difficult.</p> <p>2. Based on Observation, the facility failed to keep plumbing system devices clean and in good repair. New Findings on September 25, 2018: a. Shared Restroom 28- the commode is leaking onto the floor. b. Bathroom accros from Laundry - the commode seat is very loose.</p>	{C 164}		
{C 166}	Housekeeping-Maintained Free of Hazards	{C 166}		

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{C 166}	Continued From page 2 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 9-25-2018: a. Room 28 toilet room - the handrail for the toilet is loose. On 9/25/2018, the follow-up Survey revealed that the handrail is still some 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 9-25-2018: a. Dining room - the wall mirror has a large crack at the bottom corner near the kitchen. On 9/25/2018, the follow-up Survey revealed that thin vinyl tape was applied over the crack. The glass on either sides of the crack are in separate plains. The vinyl tape my not abate the sharp edges of the crack.	{C 166}		
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	{C 189}		

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{C 189}	<p>Continued From page 3</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>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 9-25-2018:</p> <p>a. There was a hole at the conduit penetration in the corridor ceiling outside of Room 19 which compromises the fire rated ceiling assembly.</p> <p>b. There was a unsealed gap where the wall meets the ceiling in the closets in room 5 and 11. This condition was revealed to be a pattern in most of the closets on the front hall.</p> <p>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.</p> <p>Findings on 6-27-2018:</p> <p>b. Bath across from laundry - the door drags and is difficult to close. The door does not latch when closed. On 9/25/2018, the follow-up Survey revealed the door continues to drag the floor.</p> <p>d. Salon - the door to the salon had been removed and the space does not meet the requirements for spaces open to the corridor. On</p>	{C 189}		

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{C 189}	Continued From page 4 9/25/2018, the follow-up Survey revealed no door to this room. Finding on 9/25/2018: The door to the supply closet was equipped with a dead-bolt only and could not automatically latch when closed.	{C 189}		
{C 197}	General Lighting SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (f) In addition to the required emergency lighting, minimum lighting shall be as follows: (1) 30 foot-candle power for reading; (2) 10 foot-candle power for general lighting; and (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 lighting provided in the front corridor fails to comply with the Rule above. Finding on 9-25-2018: The front hall is 128 feet long and is provided with 9 wall sconce light fixtures. Seven of those fixtures have 4.5 watt LED bulbs providing 350 lumens each, two of those fixtures have 23 watt CFL bulbs providing 8,000 lumens each, and a 60 watt incandescent bulb providing 1,600 lumens installed. The result is that the hall is dark even with all lighting turned on. In addition the walls are painted a dark gray color which adsorbs light instead of reflecting it.	{C 197}		