

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL030007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/04/2019
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NAME OF PROVIDER OR SUPPLIER THE HERITAGE OF CEDAR ROCK	STREET ADDRESS, CITY, STATE, ZIP CODE 191 CRESTVIEW DRIVE MOCKSVILLE, NC 27028
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller, conducted on January 4, 2019.</p> <p>This facility was first licensed on 12/25/1982 as a Home for the Aged serving 40 residents. Therefore, this facility must meet the 1977 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1978 North Carolina State Building Code For Institutional Unrestrained Occupancy.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 111	<p>Must Have Current San. & Fire Safety Reports</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: 1. Based on record review, and interview with Administrator the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on January 4, 2019: a. A current Annual Sprinkler System Inspection and Testing Report in accordance with NFPA 25, was not available for review by the Surveyor.</p>	C 111		
C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>SECTION .0300 - PHYSICAL PLANT</p>	C 150		

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

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C 150	<p>Continued From page 1</p> <p>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are:</p> <p>(4) Corridors shall be free of all equipment and other obstructions.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency.</p> <p>Findings on January 4, 2019:</p> <p>a. Exit near Bedroom 212 - this exit is blocked with a chair positioned behind the door and the sidewalk had a large bag of trash placed on it. Deficiency corrected before Construction Surveyors departed site.</p> <p>b. Exit near Laundry- this exit is blocked with a chair positioned behind the door. Deficiency corrected before Construction Surveyors departed site.</p>	C 150		
C 152	<p>Entrances-Steps, Porches with Handrails</p> <p>SECTION .0300 - PHYSICAL PLANT</p> <p>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(h) The requirements for outside entrances and exits are:</p> <p>(2) All steps, porches, stoops and ramps shall be provided with handrails and guardrails;</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building was not equipped with stable handrails and guardrails at steps, porches, stoops, and ramps. This would affect all residents, staff and visitors who use these unstable handrail/guardrails by not providing increasing safety, stability/balance, and</p>	C 152		

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C 152	Continued From page 2 maneuverability required of these devices. Findings on January 4, 2019: a. Front Porch - the longest guardrail in the middle is loose.	C 152		
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. Based on Observation, the facility failed to provide an environment in accordance with this Rule. This would affect all residents, staff and visitors by exposing them to, unclean conditions and equipment in disrepair. Findings on January 4, 2019: a. Shower Room near Bedroom 208 - the connection of the commode to the floor is loose. b. Lady Restroom 200 Hall - the connection of the commode to the floor is loose. c. Restroom near Bedroom 102 - the connection of the commode to the floor is loose. d. Shower Room near Bedroom 104 - the connection of the commode to the floor is loose. 2. Based on observation, the building walls are not kept clean and in good repair. Findings on January 4, 2019: a. Shower Room near Bedroom 208 - the	C 164		

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C 164	Continued From page 3 ceramic tile wall at tub has broken tiles. b. Kitchen - the window air conditioner is very dirty. 3. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on January 4, 2019: a. Bedroom 102 Bathroom - the ventilation system with its radiation damper has an excessive accumulation of dust/lint.	C 164		
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. Based on Observation, the Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on January 4, 2019: a. Med Room/Copy/Storage Room - 4 portable medical oxygen cylinders are standing up on the floor and 2 portable medical oxygen cylinders are stand on a shelf not physically secured in racks, stands or chained to the structure. b. Employee Lounge near Bedroom 101 - 7 portable medical oxygen cylinders are standing up on the floor not physically secured in racks,	C 166		

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C 166	Continued From page 4 stands or chained to the structure. 2. Based on Observation, a hazard is present due to the possibility of the backflow of contaminated water into the domestic water supply. Findings on January 4, 2019: a. Beauty Shop - the shampoo sink has a sprayer hose long enough to reach gray water, and there is no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixtures present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed. b. Exterior Can Wash - the water lines are not equipped with a vacuum breakers to prevent backsiphonage of gray water back into the potable water plumbing lines.	C 166		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas, with the required individual towels and/or towel bars for each resident. Findings on January 4, 2019: a. Bedroom 102 Bathroom - this double	C 175		

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C 175	Continued From page 5 occupancy bedroom has one of its two towel bars broken.	C 175		
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(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.</p> <p>(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.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on Record review and interview with Management Staff, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter.</p> <p>Findings on January 4, 2019:</p> <p>a. In the 4th quarter for the last 12 months, no rehearsals were performed during 1st, 2nd and 3rd shifts.</p> <p>2. Based on Record review and interview with Administrator the Facility failed to document, a short description of what the rehearsal involved.</p> <p>Findings on January 4, 2019:</p> <p>a. There is no a short description of what the rehearsal involved.</p>	C 185		

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C 189	Continued From page 6	C 189		
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> <ol style="list-style-type: none"> 1. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. <p>Findings on January 4, 2019:</p> <ol style="list-style-type: none"> a. Bedroom 208 - there is a hole through the heat detector's base not firestopped as it penetrates the fire-resistance-rated ceiling assembly. b. Shower Room near Bedroom 208- there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. c. Utility Room near Bedroom 202 - there is a cable bundle not firestopped as it penetrates the fire-resistance-rated wall assembly. d. Living Room - there is a gap between the two light fixtures and the ceiling not firestopped, allowing fire and smoke to penetrate the fire-resistance-rated ceiling assembly. e. Living Room - there are holes left where a light fixture was remove not firestopped as they penetrate the fire-resistance-rated ceiling assembly. f. Administrator Office - there is an with a cable 	C 189		

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C 189	<p>Continued From page 7</p> <p>bundle not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>2. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on January 4, 2019: a. LivingRoom - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed.</p> <p>3. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on January 4, 2019: a. Med Room near Staff Station - the fire alarm system's heat detector is dangling from the ceiling by its power/operational wires.</p> <p>4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on January 4, 2019: a. Bedroom 212 - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. b. Administrator Office - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle.</p> <p>5. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on January 4, 2019: a. Bedroom 207 - the latch bolt is loose and the door leaf is cracked at the latch bolt allow a large</p>	C 189		

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C 189	<p>Continued From page 8</p> <p>gap between the door leaf and its frame for smoke to penetrate.</p> <p>b. Utility Room near Beauty Shop - the corridor door is only equipped with a dead bolt lockset and cannot automatically latch into it frame.</p> <p>c. Kitchen - the corridor door does not latch into its frame when closed.</p> <p>6. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on January 4, 2019: a. Dining Room - the corridor door has a table holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch.</p> <p>7. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on January 4, 2019: a. Kitchen -since the last semi-annual maintenance of the commercial kitchen hood's fire suppression system, there has been no documentation of the monthly in-house/owner inspections.</p> <p>8. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to grow larger. This would affect all residents, staff, and visitors by not identifying emergency</p>	C 189		

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C 189	<p>Continued From page 9</p> <p>equipment not in proper working order. Findings on January 4, 2019: a. Entire Building - since the last annual maintenance, performed in July 2018, there has been no documentation of the portable fire extinguisher's monthly in-house/owner inspections.</p> <p>9. Based on observation the Building was not maintained in a safe, in good operating condition and Code compliant because doors took more opening force than allowed by North Carolina State Building Code. Findings on January 4, 2019: a. Bedroom 202 - the corridor door hits its doorframe, requiring more than 15 pounds of force to open and close the door.</p>	C 189		
C 199	<p>Exhaust Ventilation</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p>	C 199		

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C 199	Continued From page 10 1. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on January 4, 2019: a. Men/Women Restroom Front Lobby - the required exhaust ventilation system did not work. b. Employee Lounge Restroom - the required exhaust ventilation system did not work. c. Shower Room near Bedroom 104 - the required exhaust ventilation system did not work. d. Utility Room near Beauty Shop - the required exhaust ventilation system did not work	C 199		