

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL032132</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/21/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CAROLINA RESERVE OF DURHAM</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4523 HOPE VALLEY ROAD DURHAM, NC 27707</b>
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller, conducted on February 21, 2019.</p> <p>Records indicate the facility was licensed on 10/06/1995 as a HA. This facility is currently licensed for 60 Beds including a 16 bed Special care unit. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1991 (1995 Revision) Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1994 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;</p>	C 101		

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

*Catherine Armstrong*

TITLE

*Operations Specialist* 3-22-19

(X6) DATE

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C 101	Continued From page 1  This Rule is not met as evidenced by: 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all of the required procedures to properly operated doors equipped with Special Locking Arrangements. This could affect all occupants who would need to evacuate through the door(s). Findings on February 21, 2019: a. MCU - only the Med Tech had a key to operate the on/off emergency release switches at the units exit doors. This is not in accordance with the NC State Building Code requirement that if on/off emergency release switches are of the keyed type, all staff responsible for evacuation of the locked unit must carry keys at all times. a. MCU -staff interviewed, did not know about the use and location of the central on/off emergency release switch and the on/off emergency release switches at the units exit doors.	C 101		
C 134	Bathrooms-Roll-in Shower  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (7) Each home shall have at least one bathroom opening off the corridor with: (A) a door of three feet minimum width; (B) a three feet by three feet roll-in shower designed to allow the staff to assist a resident in taking a shower without the staff getting wet; (C) a bathtub accessible on at least two sides;	C 134		

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C 134	Continued From page 2  (D) a lavatory; and (E) a toilet. (8) If the tub and shower are in separate rooms, each room shall have a lavatory and a toilet;  This Rule is not met as evidenced by: 1. Based on observation and interviews with Administrator and Maintenance Director, the facility failed to provide a room(s) off a corridor with a minimum three feet door, having a tub accessible on at least two sides and a three feet by three feet roll-in shower, designed to allow the staff to assist a resident in taking a shower without the staff getting wet. A toilet and lavatory is also required in the room(s). This deficiency affects all residents who would not have the plumbing fixtures available to them when they need or desire them. Findings on February 21, 2019: a. Med Room - this room was a former Bathroom with a three-sided tub, a three feet by three feet roll-in shower, toilet and lavatory. The former configuration appears to have met the Rule. When the facility converted this room, the available of these required plumbing fixture was take away.	C 134		
C 150	Corridors-Free of equipment and Obstructions  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.  This Rule is not met as evidenced by: 1. Based on observation, exit doorways are not free of obstructions. This would affect all	C 150		

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C 150	Continued From page 3 residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on February 21, 2019: a. Sun Room - there is a table in front of the exit door, obstructing the dooe from open fully to the 42 inches clearance required .	C 150		
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 February 21, 2019: a. MCU Nurse Station - a portable medical oxygen cylinder is standing up on the floor, not physically secured in a rack, stand or chained to the structure.	C 166		
C 188	Electrical Outlets in Wet Locations  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters.	C 188		

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C 188	Continued From page 4  This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on February 21, 2019: a. Exterior Kitchen Door - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not trip with a push of the test button and when tested with a circuit tester.	C 188		
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, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on February 21, 2019: a. Employee Work Room Behind Front Desk - a floor mounted copy machine is positioned in front of an electrical panel. The surveyor attempted to open the panel door, but the copier limited its swing to about 30 degrees. This encroaches on the required 36-inches by 30-inches minimum	C 189		

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C 189	Continued From page 5 clear working space.  2. Based on observations, the Building is not being maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler discharge pattern cannot reach all areas of a room. Findings on February 21, 2019: a. Kitchen Pantry - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. b. Maintenance Closet - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector.	C 189		

The following is a summary of the Plan of Correction for Carolina Reserve of Durham. This Plan of Correction is in regards to the Corrective Action Report dated March 8, 2019. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.

#### **10A NCAC 13F .0301 Application of Physical Plant Requirements**

The physical plant requirements for each adult care home shall be applied as follows:

**(2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost;**

- Multiple keys to operate the on/off emergency release switch at exit doors in the secured unit were made and distributed to associates on 2/22/19.

#### **10A NCAC 13F .0305 Physical Environment**

**(e) The requirements for bathrooms and toilet rooms are:**

**(7) Each home shall have at least one bathroom opening off the corridor with:**

**(A) a door of three feet minimum width;**

**(B) a three feet by three feet roll-in shower designed to allow the staff to assist a resident in taking a shower without the staff getting wet;**

**(C) a bathtub accessible on at least two sides;**

- Navion Senior Solutions inherited this problem when the community was purchased. We have submitted plans with the state for a renovation which includes completely addressing this issue.

#### **10A NCAC 13F .0305 Physical Environment**

**(g) The requirements for corridors are:**

**(4) Corridors shall be free of all equipment and other obstructions.**

- Exit doors will be accessible and free of equipment or other obstructions.
- Designated table was moved for accessibility to exit door on 2/21/19.

#### **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;**

- Oxygen tank was placed in a secured stand on 2/21/19.

#### **10A NCAC 13F .0310 Electrical Outlets**

All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters.

- Designated wet location ground outlet was repaired/replaced no later than 3/15/19.

**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.**

- Designated copy machine was moved allowing for electrical panel clearance by 3/15/19.
- Fire sprinkler heads will have 18 inches clearance.

Going forward, community observations will be conducted on a routine basis by the Executive Director/Maintenance Director/Designee, for any needed maintenance needs on a routine basis.