

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL053004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/29/2019
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NAME OF PROVIDER OR SUPPLIER PARKVIEW RETIREMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1801 WICKER STREET EXT SANFORD, NC 27330
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Suzanna Fay and Frank Strickland conducted on May 29, 2019.</p> <p>Records indicate this facility was first licensed on June 1, 1988. The facility is currently licensed for 116 Beds. Additions to the facility were made in 1996 and 1998 Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1978 and 1996 with 1998 Revision Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1987 and 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensures.</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		

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

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Interview with staff revealed that the magnetic locking system does not meet the NCSBC requirements at the time of construction. The code requires that all staff responsible for the evacuation of the occupants of the locked unit must carry emergency release switch keys. Findings on May 29, 2019: a. Not all staff responsible for the evacuation of the residents carried emergency release switch keys.	C 101		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Observations revealed that the facility did not install hand grips at all commodes accessible to residents. Findings on May 29, 2019: a. Room 207 - a hand grip was not provided at the toilet.	C 133		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are:	C 160		

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C 160	Continued From page 2 (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a safe condition. Findings on May 29, 2019: a. A section of the gutter drainage pipe has become disconnected outside the 100 wing.	C 160		
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. Observations revealed that the ceilings were not kept in good repair. Findings on May 29, 2019: a. Entrance canopy - there were several 4" diameter holes cut into the aluminum soffit and there was one 12" section of damaged soffit near the main entry. b. Kitchen - the grille at the corridor door is damaged.	C 164		

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C 164	<p>Continued From page 3</p> <p>2. Observations revealed that the furnishings were not kept in good repair.</p> <p>Findings on May 29, 2019:</p> <p>a. The exterior door at the Riser Room hits the frame and does not close.</p> <p>b. Recreation Room - the sweep on the exterior door is damaged leaving a gap between the door and the threshold which will allow pests to enter the facility.</p> <p>c. Room 402 - the door drags on the frame making it difficult to open.</p> <p>d. Kitchen - the exhaust hood had a layer of grease on the louvers.</p> <p>e. New Wing Living Room - the door sweep on the back exterior door is falling off leaving a gap between the door and the threshold which will allow pests to enter the facility.</p> <p>f. Room 2 (New Wing) - the door drags on the frame making it difficult to open.</p> <p>3. Observations revealed that the walls were not maintained in good repair.</p> <p>Findings on May 29, 2019:</p> <p>a. Laundry Room - the exterior wall vent is falling out of the wall leaving gaps for pests to enter the building.</p> <p>4. Observations revealed that the floors were not maintained in good repair.</p> <p>Findings on May 29, 2019:</p> <p>a. 500 Hall Holding Kitchen - the door drags and is scraping the floor.</p> <p>b. 500 Hall Holding Kitchen - a row of floor tile at the cabinet base has shifted exposing the slab and damaged the cabinet base.</p>	C 164		

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C 166	Continued From page 4	C 166		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(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.</p> <p>This Rule is not met as evidenced by: 1. Observations revealed that the facility was not maintained free of all obstructions and hazards.</p> <p>Findings on May 29, 2019: a. Room 113 - the transition strip is missing at the corridor door leaving an unraveling carpet edge which creates a trip hazard. b. Room 314 - the metal transition strip is bent creating a trip hazard. c. Room 404 - the towel bar has broken off leaving the sharp metal edges of the mounting brackets exposed. d. Room 2 (New Wing) - the carpet is loose and bunching creating a trip hazard.</p>	C 166		
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. (k) This Rule shall apply to new and existing</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>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 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 or walls could allow fire and smoke to spread beyond the area of origin. <p>Findings on May 29, 2019:</p> <ol style="list-style-type: none"> a. Room 101 - there is a hole in the ceiling at the sprinkler head. b. Kitchen - the vent in front of the icemaker is not secure to the ceiling leaving a gap in the rated assembly. c. Recreation Room - there is a large hole around the sprinkler head near the door. d. Laundry Room - there is a hole around the sprinkler head. e. Room 404 - there are two 1/4" diameter holes in the corridor door at the door hardware. f. 500 Hall Med Room - there is a small unsealed cable penetration in the back corner of the area. g. 500 Hall TV Room - there are two 1/4" diameter holes in the corridor door at the door hardware. h. There is a gap in the ceiling around the sprinkler head outside of Room 521. i. The sprinkler head outside of Room 522 is pushed up in the ceiling leaving a large hole in the rated assembly. <ol style="list-style-type: none"> 2. 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 	C 189		

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C 189	<p>Continued From page 6</p> <p>limit the spread of smoke or fire to the area of origin.</p> <p>Findings on May 29, 2019:</p> <ul style="list-style-type: none"> a. Recreation Room - the corridor door hits the frame and does not close and latch. b. Room 311 - the corridor door does not latch. c. Room 314 - the metal transition strip is bent preventing the door from closing. d. Room 7 (New Wing) - the door does not latch when closed. <p>3. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin.</p> <p>Findings on May 29, 2019:</p> <ul style="list-style-type: none"> a. Beauty Shop - the position of the rubber chair mat did not allow for the door to close. The mat was moved at the time of survey. <p>4. 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 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 May 29, 2019:</p> <ul style="list-style-type: none"> a. The cross corridor doors by Room 301 overlap and do not close flush. <p>5. Observations revealed that the plumbing equipment is not maintained in a safe and operating condition. Unsecure toilets can cause</p>	C 189		

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C 189	Continued From page 7 injury from slips or falls. Findings on May 29, 2019: a. Room 404 - the toilet is loose.	C 189		
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: 1. Observations revealed that the facility did not provide exhaust ventilation in required areas. Findings on May 29, 2019: a. Cleaning agents were stored in the closet by Room 207 and no exhaust ventilation was provided. There was an odor of disinfectants in the closet. b. Room 316 - the exhaust fan did not hold a thin sheet of plastic when pressed to the grille.	C 199		