

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL047011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/23/2019
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NAME OF PROVIDER OR SUPPLIER THE CROSSINGS AT WAYSIDE	STREET ADDRESS, CITY, STATE, ZIP CODE 8398 FAYETTEVILLE ROAD RAEFORD, NC 28376
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller and Susanna Fay, conducted on July 23, 2019.</p> <p>Records indicate this facility was first licensed on 04/23/2015. The facility is currently licensed for 75 Beds. Therefore, the facility was surveyed for conformance with the applicable portions of the 2012 Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the 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		

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

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C 101	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by:</p> <p>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 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 July 23, 2019:</p> <p>a. AL Nurse Station - two staff interviewed, did not know about the use of the central on/off emergency release switch.</p> <p>b. MCU Nurse Station - two staff interviewed, did not know about the use of the central on/off emergency release switch.</p> <p>2. Based on observation, the fire sprinkler system failed to meet the Code requirements in effect at the time of construction or alterations by not having all required areas protected with sprinklers. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room of origin. Findings on July 23, 2019:</p> <p>a. AL Exterior Storage Closet in Courtyard - there is no automatic fire sprinkler protection in this room.</p>	C 101		
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>	C 111		

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C 111	Continued From page 2 This Rule is not met as evidenced by: 1. Based on record review, and interview with Executive Director Maintenance Director 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 July 23, 2019: a. The last annual Fire and Building safety Inspection Report, available for review, has a May 16, 2017 date.	C 111		
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 building Floors are not kept clean and in good repair. Findings on July 23, 2019: a. Carpeted Corridors - there is a pattern exhibited where most carpets are stained, and dirty from heavy traffic. 2. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on July 23, 2019: a. AL Nurse Station Half Bath - the ventilation system with its radiation damper has an	C 164		

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C 164	Continued From page 3 excessive accumulation of dust/lint. b. Kitchen - the HVAC returns with their radiation dampers have an excessive accumulation of dust/lint. c. Kitchen Office - the HVAC return 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 July 23, 2019: a. Bedroom 104 Closet - two portable medical oxygen cylinders are standing up on the floor not physically secured in racks, stands or chained to the structure.	C 166		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof.	C 183		

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C 183	Continued From page 4 (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staff's ability to extinguish a small fire and permit it to grow larger. Findings on July 23, 2019: a. Kitchen - the fire extinguisher is missing its annual maintenance tag. b. Riser Room - since the last annual maintenance, performed in March 2019, there has been no documentation of the portable fire extinguisher's monthly in-house/owner inspections.	C 183		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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. (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. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review of the last 12	C 185		

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C 185	Continued From page 5 months of rehearsals, and interview with Executive Director and Maintenance Manager the Facility failed to fully document a short description of what the rehearsal involved. Findings on July 23, 2019: a. Most quarters do not have a short description of what the rehearsal involved.	C 185		
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 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 July 23, 2019: a. Exit near Bedroom 114 - the exit sign does not illuminate on backup power when tested. b. AL Courtyard Exit into Building - the combination exit sign and emergency light does not illuminate on backup power when tested. c. AL Courtyard Exit into Building - the combination exit sign and emergency light is missing its face plate. d. Exterior Emergency Lighting - there is a pattern exhibited where most of these emergency	C 189		

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C 189	<p>Continued From page 6</p> <p>lights do not illuminate on backup power when tested.</p> <p>e. MCU Exit near Bedroom 405 - the combination exit sign and emergency light does not illuminate on backup power when tested.</p> <p>f. Front Door - the combination exit sign and emergency light does not illuminate on backup power when tested.</p> <p>2. 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. Findings on July 23, 2019: a. AI Dining - a expansion joint in the one-hour fire-resistance-rated gypsum ceiling assembly is deteriorating and has lost its fire-resistance capability. b. MCU Dining - there is a gap at the data port not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>3. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on July 23, 2019: a. Bedroom 411 - the corridor door hits its frame and will not close with normal force.</p> <p>4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on July 23, 2019: a. Laundry Dryer Room - there is an electrical power receptacle missing its cover plate.</p> <p>5. Based on observation the ice machine drain line is in direct contact with the floor drain. Ice machine drains that directly contact the floor or floor drain and that are less than a minimum of 2</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>inches of vertical clearance above the floor present the possibility of contamination of the ice machine.</p> <p>6. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the room of origin. Findings on July 23, 2019:</p> <p>a. Resident Storage - two escutcheon plates on the fire sprinklers have dropped down from the fire-resistance-rated ceiling exposing openings that allows the spread of smoke and heat.</p> <p>b. Exit near Bedroom 207 - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>c. MCU Resident Care Director</p> <p>d. MCU Dining - two escutcheon plates on the fire sprinklers have dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>e. Corridor near Bedroom 309 - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>f. MCU Resident Care Director - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>g. Front Lobby back Section - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p>	C 189		

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C 191	Continued From page 8	C 191		
C 191	<p>Unvented & Portable Elec. Heaters Prohibited</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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: 1. Based on Observation, the facility failed to prevent the use of portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if heater is the ignition source of a fire. The danger increases if used by resident or combustible material is near. Findings on July 23, 2019: a. AL Office - a portable electric heater was found in this room. b. Business Office - a portable electric heater was found in this room.</p>	C 191		