

Division of Health Service Regulation

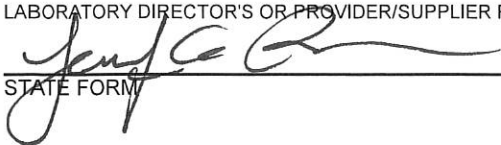
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034093	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/18/2019
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NAME OF PROVIDER OR SUPPLIER DANBY HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 3150 BURKE MILL ROAD WINSTON SALEM, NC 27103
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on July 18, 2019.</p> <p>Records indicate the Carolina and Salem Wings were completed in 1980 and are not sprinkler protected. That portion of the facility must meet the 1977 Rules, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1978 North Carolina State Building Code, Section 409, Institutional Occupancy. The Piedmont and Winston Wings, along with the Special Care Unit was first licensed or submitted on 7-30-1998. Therefore, that part of the facility must meet the 1996 Rules, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 North Carolina State Building Code, section 409, Institutional Occupancy. The facility is licensed for 100 beds total with 48 in a Special Care Unit.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000	<p>Responses to sited deficiencies does not constitute an admission or agreement by the facility of the truth of alleged or conclusions set forth in this statement of Deficiencies of Correction Action Report; the plan is solely as a matter of compliance with state law.</p>	
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 Executive Director the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s)</p>	C 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE

Executive Director

(X6) DATE

8/8/19

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C 111	Continued From page 1 required by this Rule. Findings on July 18, 2019: b. The current Fire and Building safety Inspection Report is not available for review by the Surveyor.	C 111	10A NCAC 13F .0302 (f) 1a. Fire Drill reports will be completed quarterly (1 per shift) ongoing in accordance with required regulations.	
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that resident toilet rooms and bathrooms are not utilized for storage or purposes other than those indicated in the Rule. This deficiency affects all residents and staff who would not have the fixtures and/or space for the services needed. Findings on July 18, 2019: a. MCU Spa - this area is being utilized to store 36 cases of diapers. This is impeding the ability to bathe/shower residents.	C 135	1b. Annual Fire and Building Safety Inspection Report was completed on 7-28-2019. 10A NCAC 13F .0305 (e)(10) 1a. Memory care spa room is clear of all storage as of 08/05/2019.	
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:	C 150		

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C 150	Continued From page 2 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. Findings on July 18, 2019: a. AI Dining - the exterior exit door is obstructed with a table and chairs set up in front to this marked exit. b. MCU Dining - the exterior exit door is obstructed with a row of chairs set up in front to this marked exit.	C 150	10A NCAC 13F .305 (g) (4) 1a. and 1b. all exit doors in dining rooms will be reconfigured to ensure a clear path through exit doors.	
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (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. Based on observation, the outside grounds are not maintained in a clean and safe condition. Findings on July 18, 2019: a. MCU Dining Exterior Exit -on the patio there are two bricks in the egress pathway, creating a tripping hazard.	C 160	10A NCAC 13 F .0305 (m) (1) 1a. All pathways will be clear of all trip hazards and in compliance by 08/30/2019.	
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;	C 164		

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C 164	<p>Continued From page 3</p> <p>(2) have no chronic unpleasent 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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on July 18, 2019: a. AL Spa - the ventilation system with its radiation damper has an excessive accumulation of dust/lint.</p> <p>2. Based on observation, the building Ceilings are not kept clean and in good repair. Findings on July 18, 2019: a. Salem Hall Bathroom near Smoke Barrier - the textured ceiling is detaching from the ceiling in several small areas.</p> <p>3. Based on observation, the building walls are not kept clean and in good repair. Findings on July 18, 2019: a. MCU Storage near Bedroom 211 - there is a hole in the wall that needs to be sealed.</p>	C 164	<p>10A NCAC 13F .0306 (a) (1) (2) (3) (e)</p> <p>1a. All dust and lint will be removed, and vent will be cleaned and in compliance by 08/30/2019.</p> <p>2a. Textured ceiling was repaired by 08/05/2019.</p> <p>3a. MCU storage near bedroom 211-- wall was repaired by 08/05/2019.</p>	
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C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>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.</p>	C 166		
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C 166	Continued From page 4 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 18, 2019: a. Salem Hall Bedroom 104- a portable medical oxygen cylinder is laying on its not physically secured in a rack, stand or chained to the structure. b. Carolina Hall Bedroom 115 - a portable medical oxygen cylinder is standing up on the floor not physically secured in a rack, stand or chained to the structure. c. Bedroom 216 - a portable medical oxygen cylinder is standing up on the floor not physically secured in a rack, stand or chained to the structure. 2. Based on Observation, the Building was not maintained free of hazards, because general maintenance was not being done or had not been completed. This could affect all residents, staff, and visitors if items are broken or partially removed and left where they could injure all. Findings on July 18, 2019: a. NCU Bedroom 208 - the mounting brackets for the towel bars remain attached to the wall. These brackets are rough and have sharp edges, which provides potential to cause injury. b. NCU Nurse Station -a picture frame's glass is broken exposing sharp and jagged edges.	C 166	10 A NCAC 13F .0306 (a) (5) (e) 1a, b and c all oxygen cylinders will have racks or stands and will be in compliance by 08/30/2019. 2a. Towel bar in room 208 will be repaired by 08/30/2019. 2b. Nurses station picture frame was repaired by 08/01/2019.	
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 175		

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C 175 Continued From page 5

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 July 18, 2019:
a. MCU Bedroom Bathrooms - many of these rooms do not have any means for hanging a towel or in the adjoining bathroom.

C 175

10 A NCAC 13F .0306 (b) (7) (e)

1a. The appropriate number of towel bars will be installed by 08/30/2019.

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.
(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. This would affect all residents, staff, and visitors by not identifying emergency equipment not in proper working order.
Findings on July 18, 2019:

C 183

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C 183	Continued From page 6 a. MCU Corridor near Bedroom 206 - the fire extinguisher is missing its annual maintenance tag. Staff did continue recording monthly in-house inspection until February 2018 on a piece of paper.	C 183	10A NCAC 13F .0308 (a) (b) 1a. Annual maintenance tags have all been updated as on 7/28/2019.	
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 months of rehearsals, and interview with Executive Director the Facility failed to fully document the staff members present, of what the rehearsal involved. Findings on July 18, 2019: a. The fire plan rehearsal records did not provide a list of staff members participating for the 3rd and 4th quarters.	C 185	10A NCAC 13F .0309 (b) (c) (f) 1a. Fire Drill reports will be completed quarterly (1 per shift) ongoing in accordance with required regulations.	
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS	C 188		

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C 188	<p>Continued From page 7</p> <p>All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters.</p> <p>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 July 18, 2019: a. AL Nurse Wash Station - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power and could not be tested for ground fault.</p>	C 188	<p>10 A NCAC 13F .0310</p> <p>1a. GFCI at nurses station was repaired by 08/05/2019</p>	
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C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>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.</p> <p>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 18, 2019:</p>	C 189		
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C 189	<p>Continued From page 8</p> <p>a. AL Nurse Station - the exit sign is not illuminating on normal power.</p> <p>b. Salem Hall Activity - the self-contained emergency light on the corridor wall does not illuminate on backup power when the test button is pushed.</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 18, 2019:</p> <p>a. Administrator Office - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>b. Front Office - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Administrator Office - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>c. RCC Office - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>d. Staff Lounge - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>e. Kitchen Pantry - the gypsum/plywood attic access has broken edges. This leaves gaps not firestopped as they penetrate the fire-resistance-rated ceiling assembly.</p> <p>f. Mech Room across from Front Entrance - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>g. Mech Room across from Front Entrance - above the water heater, a hole with its firestopped sealant is falling out of the fire-resistance-rated ceiling, leaving an unprotected opening.</p> <p>h. AL Med Room - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p>	C 189	<p>10A NCAC 13F .0311 (a) (k)</p> <p>1a. Exit sign was repaired by 08/05/2019.</p> <p>1b. Salem Hall- Emergency light will be repaired by 08/30/2019.</p> <p>2a, b, c, d, e, f, g, h, i and j All cable penetrations will be repaired by 08/30/2019.</p>	
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C 189	<p>Continued From page 9</p> <p>i. AL Nurse Station Haft Bathroom - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>j. MCU Nurse Station - there are three cables not firestopped as they penetrate the fire-resistance-rated ceiling assembly.</p> <p>3. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on July 18, 2019: a. Can Wash Area - the ground-fault circuit-interrupter (GFCI) electrical power receptacle is missing its weather resistant cover.</p> <p>4. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on July 18, 2019: a. Carolina Wing Janitorial - the corridor door's strike plate has a piece of card board covering the strike plate preventing the door from latching into its frame. b. Bedroom 201 - the corridor door does not latch into its frame when closed. c. Bedroom 212 - the corridor door does not latch into its frame when closed. d. Bedroom 214 - there is a 5/8-inch gap between the face of the door and the stop on the doorframe near the door handle. e. MCU therapy - there is a hole through the corridor door around the door handle.</p> <p>5. Based on observation, the Building is not maintained in a safe and operating condition, because exit doors do not open a minimum of 90 degrees for egress Findings on July 18, 2019: a. MCU Dining Exterior Exit - there are sand bags behind the door limiting the door swing to</p>	C 189	<p>0A NCAC 13F .0311 (a) (k) cont.</p> <p>3a. GFCI at ground fault will be repaired by 08/30/2019.</p> <p>4a. all cardboard was removed from stike plate 07/18/2019.</p> <p>4b. Room 201 door will be repaired by 08/30/2019.</p> <p>4c. Room 212 door will be repaired by 08/30/2019.</p> <p>4d. Room 214 door will be repaired by 08/30/2019.</p> <p>4e. MCU Therapy door will be repaired by 08/30/2019.</p> <p>5a. All Exterior doors will be free of obstructions by 8/30/2019.</p>	

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C 189	<p>Continued From page 10</p> <p>about 70 degrees.</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 or compartment of origin. Findings on July 18, 2019:</p> <p>a. MCU Front Porch - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>b. MCU Front Porch - the fire sprinkler head is missing its escutcheon plate, exposing an opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>7. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on July 18, 2019:</p> <p>a. Bedroom 113 - the corridor door has a wedge holding the door open.</p> <p>b. Bedroom 121 - the corridor door has a wedge holding the door open and the bottom hinge is loose.</p> <p>c. Bedroom 122 - the corridor door has a trash can holding the door open.</p> <p>d. Bedroom 115 - the corridor door has a stuffed animal holding the door open.</p> <p>e. Bedroom 116 - the corridor door has a trash can holding the door open.</p> <p>f. Bedroom 214 - the corridor door has a chair holding the door open.</p>	C 189	<p>0A NCAC 13F .0311 (a) (k) cont.</p> <p>6a. MCU escutcheon plate will be repaired by 08/30/2019.</p> <p>6b. MCU escutcheon plate will be replaced by 08/30/2019.</p> <p>7a, b, c, d, e and f All bedroom doors will be repaired to stay open on their own, and all devices holding doors open will be removed.</p>	
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