

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL007025	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 06/19/2024
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

PANTEGO REST HOME

**143 SWAMP ROAD
PANTEGO, NC 27860**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on June 19, 2024. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{C 000}		
{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. Observations revealed that the outside grounds were not maintained in a clean and safe condition. Findings on June 19, 2024: a. A 30" section of the exterior soffit at the right front side of the facility has rotted and is hanging down. b. A 24" section of the exterior soffit left of the front entry has deteriorated and is no longer attached. b. Enclosed Porch - the left front window glass is broken. c. There is a pattern of torn or damaged window screens around the facility. There is a heavy accumulation of debris and spider webs between the screens and the windows. e. Grounds left of facility - there is one rotting post and a section of broken concrete laying in the middle of the side yard. There are multiple	{C 160}	Administrators had Housekeeper to clean debris and spider webs from screen/windows on 6/19/24. Manager will ensure that Housekeeping deep clean all window seals and etc. weekly or as needed. All other repairs have been started by maintenance. Facility manager will ensure safety of residents until completed. Plan of Completion corrective Date: 6/19/2024	

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

TITLE

(X6) DATE

Monica Gibbs Administrator 7/1/24

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NAME OF PROVIDER OR SUPPLIER PANTEGO REST HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 143 SWAMP ROAD PANTEGO, NC 27860		
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{C 160}	Continued From page 1 holes and ruts that are creating trip hazards. There is ongoing work with the drainage system that has left holes full of water and piles of dirt around this side of the building.	{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 furniture and furnishings were not kept in good repair. Findings on June 19, 2024: c. Room 9 - there is a 3" hole in the closet door. 2. Observations revealed that the walls and ceilings were not kept in good repair. Findings on June 19, 2024: a. Room 13 - there is a crack in the ceiling where an old patch is opening up. There is a 24" diameter area near the closets that has a yellow water stain and the finish within the stain is bubbling and flaking. b. There is a 6" x 12" hole knocked into the corridor wall outside of the kitchen door. The paint finish on the wall across from the hole is chipping and flaking off.	{C 164}	<i>Facility manager will ensure facility is kept clean at all times. Maintenance has started repairs. Facility manager will ensure repairs are completed. Dietary will clean and continue to monitor daily to maintain clean appliances. Dietary immediately cleared hood drain pan on 6/19/24. Plan of Completion correction: 8/19/24</i>	

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{C 164}	Continued From page 2 c. Kitchen - the wall by the handwashing sink is flaking and peeling. d. Kitchen - there is an accumulation of grease and dirt on the HVAC grille in front of the hood.	{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 facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on June 6, 2024: a. Oxygen Supply Room - there are oxygen bottles unsecured in a shallow plastic crate. Interview with staff revealed that these were purchased by a previous resident's family and they have been unable to locate a vendor to remove the bottles. New Deficiency: b. Nurse Station - there is a shallow plastic crate full of oxygen bottles without any means of restraint to prevent the bottles from falling or getting knocked over.	{C 166}	Facility manager has continued to contact DME Company about removing / disposal of Oxygen tanks for a discharged resident. Facility manager had empty tanks removed and placed filled tanks in a secure holder provided by DME Company on 6/21/24. Plan of Completion Correction: 6/21/24	

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(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 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 could allow fire and smoke to spread beyond the area of origin. Findings on June 19, 2024: a. Enclosed Porch - one of the grille vents is not secure leaving a gap in the fire resistant rated ceiling. b. Office - the vent cover in the right back corner is not secure leaving a gap in the fire resistant rated ceiling. c. Office - there is an unsealed cable bundle in the front corner of the room. d. There is an unsealed cable penetration in the ceiling at the emergency light outside of Room 1. e. Laundry - the panel above the water heater has gaps around the perimeter and the water heater lines are not sealed where they penetrate the ceiling. f. There are three small holes in the ceiling outside of Room 16. g. Kitchen Pantry - there are two unsealed penetrations over the ECO Smart panel.	(C 189)	<i>Maintenance started repairs on 7/19/24 and Facility Manager will continue to monitor repairs to ensure all are completed</i> <i>Plan of Completion Correction: 8/19/24</i>		

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{C 189}	Continued From page 4 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 limit the spread of smoke or fire to the area of origin. Findings on June 19, 2024: a. Room 2 - the latch plate is missing and the door does not close and latch. b. Room 3 - the bottom hinge is loose and the door is dragging heavily on the floor. c. Room 10 - the door is dragging heavily on the floor requiring excessive force to open. This was corrected at the time of survey. 3. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on June 19, 2024: b. Men's Bath - the right sink is not secure to the wall. 4. Based on observation there is a failure to install plumbing piping, plumbing devices and equipment in a safe manner or in operating condition. Failure to maintain or install piping, plumbing devices and equipment in a safe manner or in operating condition could affect occupants of the facility if the plumbing system does not operate as required. Water heater pressure relief valves are required to be piped with an approved material from the valve to within 6" of the grade below. Findings on June 19, 2024: b. Laundry Room - the water heater pressure	{C 189}	Rm 2 latch Plate Repaired on 6/19/24, Rm 3 bottom hinge Repaired on 6/19/24 Rm 10 door dragging the floor repaired 6/19/24 All other findings are being repaired by maintenance. Plan of Completion Correction: 8/19/24		

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{C 189}	Continued From page 5 relief valve has not been piped. 5. Observations revealed that the mechanical equipment is not maintained in a safe and operating condition. Findings on March 26, 2024: a. There are two duct openings outside of Laundry for the dryer vents. Neither has a cover or cap to prevent pests from entering the facility. 6. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment did not function during a fire. Findings on June 19, 2024: a. Clean Linen - the bottom plate on the heat detector is bent 90 degrees. b. Oxygen Supply Closet - the heat detector is dangling from its wires. 7. Based on observation, the electrical equipment is not being maintained in a safe operating condition. Missing or broken cover plates on electrical devices may cause injury to the occupants of the facility if wiring is exposed. Findings on June 19, 2024: b. The top of the cover plate on the outlet at the security panel is broken off. 8. Based on observation, the electrical equipment is not maintained in a safe and operating condition. Findings on June 19, 2024: a. Kitchen Pantry - the light lens is damaged and	{C 189}			

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{C 189}	Continued From page 6 hanging from the frame.	{C 189}		
{C 195}	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 and testing revealed that the hot water temperature at all fixtures used by residents was not maintained between 100 degrees F and 116 degrees F. Findings on June 19, 2024: b. Tub Bath - the water temperature at the sink was 130 degrees F. A new water heater had just been installed. The thermostat on the water heater was adjusted. The door was secured and the water was left running to get the temperature to within the required range.	{C 195}	Hot water fixtures were adjusted by maintenance on 6/19/24 and temp ranged at 110 degrees F. Facility manager or Housekeeper will check temp during facility inspection to ensure temperature is in range for the safety of the Resident. Tub Bath water temperature adjusted and ranged 110 degrees F. Plan of completion correction: 6/17/24	