

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL053031</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/15/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>SANFORD SENIOR LIVING</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1107 CARTHAGE STREET SANFORD, NC 27350</b>		
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C 000	Initial Comments  Report of a Construction Section Biennial Survey by Suzanna Fay conducted on October 15, 2024.  This facility was licensed on June 12, 1995 for 50 beds. Based on this information, this facility is required to meet the 1993 Rules for the Licensing of Domiciliary Homes (Homes for the Aged and Family Care Homes); the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds; and the 1991 North Carolina State Building Code, Section 409.1 Group I- Unrestrained Occupancy.  Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 111	Must Have Current San. & Fire Safety Reports  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.  This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have current fire and building safety inspection reports maintained in the home and available for review.  Findings on October 15, 2024: a. There was not a copy of the current Fire Official's Inspection Report available for review. b. There was not a copy of the current Fire Alarm System Inspection Report available for review. c. Review of the Sprinkler System Inspection Report revealed several deficiencies including but	C 111		

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

TITLE

(X6) DATE

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C 111	Continued From page 1  not limited to, issues with the fire backflow shutoffs, missing spare heads and forty or more pendants that are corroded, painted or not free of foreign material.	C 111		
C 132	Bathrooms-Must Provide Privacy  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains;  This Rule is not met as evidenced by: 1. Observations revealed that the community bathrooms did not have privacy partitions or curtains at the tubs or showers.  Findings on October 15, 2024: a. Therapeutic Shower Room - curtains were not installed at the shower or tub.	C 132		
C 143	Janitor's Closets-Locked  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies	C 143		

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C 143	Continued From page 2  shall be monitored while in use;  This Rule is not met as evidenced by: 1. Observations revealed that cleaning agents and bleaches were stored in an unlocked closet.  Findings on October 15, 2024: a. Storage by Room 11 - the storage room contained bleach and other cleaning agents and the door did not have locking hardware. The cleaning agents were moved to another location at the time of survey.	C 143		
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 premises were not maintained in a clean and safe condition. Openings in the exterior facades allows for pests to enter the facility.  Findings on October 15, 2024: a. Exit by Room 12 - one section of the exterior soffit has fallen out leaving a 6" x 24" hole for pests to enter.  2. Observations revealed that the outside premises were not maintained in a clean and safe condition.	C 160		

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C 160	Continued From page 3  Findings on October 15, 2024: a. Kitchen Porch - the exterior siding at the storage room is rotting and curled at the outside corner. b. Kitchen Porch - the exterior door is missing its exterior hardware so that staff cannot enter the kitchen from the porch.	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 walls, ceilings and floors were not kept clean and in good repair.  Findings on October 15, 2024: a. There was a general pattern of exhaust fan grilles and their radiation dampers with heavy accumulations of dust. b. Kitchen - the finishing tape is splitting and separating from the ceiling near the horn strobe. c. Room 25 - the transition strip at the carpet edge is coming loose at the hinge side of the door. d. Room 16 Bath - there is a deep gouge in the wall behind the toilet grab bar. The wall behind the grab bar is stained brown. e. Room 16 Bath - there are two patches in the	C 164		

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C 164	Continued From page 4  wall below the grab bar that have not been finished and painted. f. Room 16 Closet - there is a hole in the door that has been filled but not finished and painted. g. Room 16 - the closet door behind the door does not latch. h. Room 15 - the door hardware is loose. i. Corridor outside of Room 20 - the ceiling has yellow water stains along the wall. The paint on the wall has bubbled and an 8" x 24" section of the paint has peeled off. j. Water Heater Room - there is a long brownish water stain on the ceiling from the left wall to the center of the room.  2. Observations revealed that the furnishings were not kept in good repair. Broken accessories leaves sharp metal edges of the mounting brackets exposed which can cause injury.  Findings on October 15, 2024: a. Room 1 - the toilet paper dispenser is broken off the wall leaving one of the metal mounting brackets exposed.  3. Observations revealed that the furniture was not in good repair.  Findings on October 15, 2024: a. Nurses Station - one of the drawer knobs has fallen off.	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	C 166		

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C 166	Continued From page 5  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. Observations revealed that the facility was not maintained free of all obstructions and hazards. Latches on the interior side of resident bedroom doors prevents staff from accessing the room in the event of an emergency.  Findings on October 15, 2024: a. Room 1 - a chain latch was installed on the interior side of the bedroom door.	C 166		
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. Review of records revealed that the facility did not have available records of the quarterly fire rehearsals which would include the date and time	C 185		

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C 185	Continued From page 6  of the rehearsals, the shift, staff members present and a short description of what the rehearsal involved.  Findings on October 15, 2024: a. Staff were not able to locate the quarterly fire rehearsal logs for review.	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 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 October 15, 2024: a. Living Room - the magnetic hold open device was broken off of the right hand door. The door is equipped with a closer and did not automatically close and latch when released. b. Room 13 - the latch is jammed and does not release into the latch plate preventing the door from latching when closed.	C 189		

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C 189	<p>Continued From page 7</p> <p>c. Kitchen - the corridor door has dropped and rubs on the frame so that it does not automatically close and latch.</p> <p>d. Florida Room - the door closer has been removed and the door no longer automatically closes and latches.</p> <p>e. Room 14 - the door does not latch when closed.</p> <p>f. Laundry - the door is rubbing hard on the frame at the top causing the veneer to pull off and chip.</p> <p>g. Dining - the doors did not completely close when released by the fire alarm.</p> <p>2. Based on observation there is a failure to maintain the building's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be affected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin.</p> <p>Findings on October 15, 2024:</p> <p>a. Living Room - the right hand door was held open by a chair.</p> <p>b. Florida Room - the door was propped open with a trash can.</p> <p>c. Kitchen Pantry - the door is propped open with a step stool and several food cans.</p> <p>3. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be affected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection.</p> <p>Findings on October 15, 2024:</p> <p>a. The fire extinguishers were serviced in March</p>	C 189		



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C 189	<p>Continued From page 8</p> <p>and in-house monthly inspections ended in May. b. Kitchen - the kitchen hood was last inspected in November of 2022.</p> <p>4. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Nonfunctioning call bell systems create a false sense of security and may impede the resident from receiving necessary care.</p> <p>Findings on October 15, 2024: a. The resident rooms have an old call system installed with the cords and call buttons in place but the system is no longer functioning. The bathroom calls are functioning.</p> <p>5. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition.</p> <p>Findings on October 15, 2024: a. Therapeutic Shower Room - the door closer is leaking oil and the door slams shut which could cause injury. b. Kitchen Porch - the back flow cap on the right is missing and there is a brown granular substance in the dryer vent and piled up on the ground around the vent.</p> <p>6. 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.</p> <p>Findings on October 15, 2024: a. There is a 3" diameter hole in the ceiling outside of the Florida Room.</p>	C 189		

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C 189	<p>Continued From page 9</p> <p>b. One of the screws on the ceiling vent outside of Room 18 is backing out causing the vent to drop and leaving a gap in the fire resistant rated ceiling.</p> <p>c. Room 19 - there is a small gap at the front light where the fixture does not cover the opening.</p> <p>7. Observations revealed that the plumbing equipment was not maintained in a safe and operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility.</p> <p>Findings on October 15, 2024:</p> <p>a. Room 16 Bath - the toilet is not secure to the floor and the tank lid is sitting on the floor.</p> <p>8. Based on observation there is a failure to install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping with a minimum 2" air gap could affect all occupants of the facility if the domestic water supply became contaminated.</p> <p>Findings on October 15, 2024:</p> <p>a. Kitchen - the drain lines for the icemaker are not 2" above the floor drain.</p> <p>9. Observations revealed that the electrical equipment was not maintained in a safe and operating condition.</p> <p>Findings on October 15, 2024:</p> <p>a. Room 19 - the front light is flickering off and on.</p> <p>10. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants</p>	C 189		

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C 189	<p>Continued From page 10</p> <p>of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.</p> <p>Findings on October 15, 2024: a. The exit sign at the cross corridor doors by the Mechanical Room did not illuminate on test.</p> <p>11. 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 to suppress a fire.</p> <p>Findings on October 15, 2024: a. Riser Room - one of the valves is leaking and a temporary piping system has been installed to remove the water from the Riser Room.</p> <p>12. 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 affected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin.</p> <p>Findings on October 15, 2024: a. The right hand door of the cross corridor doors did not latch when released by the fire alarm.</p>	C 189		