

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 R 02/13/2025
NAME OF PROVIDER OR SUPPLIER THE SOUTHWOOD		STREET ADDRESS, CITY, STATE, ZIP CODE 3150 BURKE MILL ROAD WINSTON SALEM, NC 27103		
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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey conducted by Ed Miller on February 13, 2025. Not all previously cited deficiencies have been corrected, and several new deficiencies have been discovered; therefore, a new plan of correction is required.	{C 000}	Response to the cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies or Corrective Action Report. The Plan of Correction is prepared solely as a matter of compliance with State Laws	
{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: 1. Based on observation there is a failure to maintain the corridors free of all equipment and other obstructions. Corridors must maintain six feet clear for egress. Means of egress or exit paths that are obstructed or blocked could delay or hinder emergency evacuation of the occupants from the facility. Findings on February 13, 2025: a. There was one chair, and a wheelchair on either side of the exit door by Room 127 reducing the corridor width to the width of the door. b. There was a wheelchair stored in the corridor outside of Room 127 that reduced the width of the corridor to less than six feet. Facility Staff corrected this deficiency before the Construction Surveyor left the site. cc. Activity Room - a table was partially in front of a door, which reduced the width of the exterior exit door.	{C 150}	All furniture/equipment moved to ensure hall is free of any obstructions All furniture in Activity Room placed correctly not to reduce the width of the exterior exit door.	3/3/25 3/3/25

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

[Signature]

TITLE

[Signature]
Director

(X6) DATE

3/17/25

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{C 160}	<p>Outside Premises-Clean, Safe</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(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;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the outside grounds were not maintained in a clean and safe condition.</p> <p>Findings on February 13, 2025: c. Winston Hall - the exterior fascia trim at the right corner of the front exit is rotted and the paint has flaked off.</p>	{C 160}	Exterior fascia trim replaced and painted.	3/3/25	
{C 164}	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(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.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the walls, ceilings and floors are not kept clean and in good repair.</p> <p>Findings on February 13, 2025:</p>	{C 164}			

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{C 164}	Continued From page 2 a. Kitchen - there was a broken bowl and other trash under the icemaker. The drain line for the icemaker was about twelve inches from the drain and water ponds up under the drain line. b. Room 118 - there are some small brown water stains on the ceiling along the left wall. The paint is bubbled on the ceiling and wall around the water stains. c. Housekeeping across from Activity Room - the ceiling is stained and sagging and there is a fresh wet spot on the ceiling along the left wall. d. Salem Hall Community Bath - there is a brown stain on the ceiling over the toilet. The finish on the wall beside the toilet is bubbled and flaking. f. Room 213 Bath - there is a heavy accumulation of dust on the exhaust fan grille. g. Piedmont Hall Spa - there is a heavy accumulation of dust on the exhaust fan grille. h. Staff Bathroom with Tub - there is microbial growth inside the supply vent. The ceiling around the vent is bubbled. i. Main Hall Spa - the ceiling over the showers is flaking and peeling. There is a 12" oval shaped area of damaged ceiling from a leak near the toilet. New Findings on February 13, 2025: jj. Main Hall Spa - floor drain was missing its floor drain grate, creating a tripping hazard. 2. Based on observation, the furnishings were not kept in good repair. Findings on February 13, 2025: b. Salem Hall Community Bath - the toilet paper dispenser was missing. New Findings on February 13, 2025: dd. Salem Hall Community Bath - the toilet paper dispenser has been removed, but the mounting brackets remain attached to the wall. These brackets were rough and have sharp edges,	{C 164}	A. All trash removed under the icemaker. The drain line for icemaker adjusted to prevent water ponds from forming under drain line. B. Room 118 ceiling stains removed and fresh paint applied. C. Ceiling in Housekeeping room across from Activity Room repaired. D. Salem Hall Bath ceiling repaired over toilet and wall beside toilet repaired. F. Room 213 Bather exhaust fan grille cleaned to remove dust. G. Piedmont Hall Spa exhaust fan grille cleaned to remove dust. H. Staff Bathroom ceiling vent cleaned and repaired to remove bubbled area. I. Main Hall Spa ceiling leak repaired and painting repaired. JJ. Main Hall Spa floor drain replace. 2 -b. Salem Hall Bath toilet paper dispenser replaced to proper working order.	3/3/25 3/3/25 3/3/25 3/3/25 3/4/25 3/4/25 3/4/25 3/4/25 3/4/25 3/3/25	

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{C 164}	Continued From page 3 which provides potential to cause harm.	{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. New Findings on February 13, 2025: aa. Oxygen Storage -. there were four small oxygen tanks, three medium oxygen tanks with regulators extending beyond their collar guards, two large oxygen tanks with regulators extending beyond their collar guards and one large oxygen tank sitting on the floor of the room, unsecured. There was one medium oxygen tank leaning over in a cylinder stand made for a larger tank. 2. Based on observation, the outside grounds were not maintained in a safe condition. New Findings on February 13, 2025: bb. Stoop across from Small Dining - the ground around the concrete stoop has washed away	{C 166}		3/4/25 All Oxygen tanks now placed in crates secured in oxygen storage room. Regulators have been removed from tanks for storage. All tanks have been placed in proper cylinder stands.	

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{C 166}	Continued From page 4 leaving a four-inch-deep by ten-inch-wide hole on two sides of the stoop making it difficult to exit safely. In addition, there was a four-inch black corrugated pipe from the downspout in the path of egress, creating a tripping hazard.	{C 166}	Stoop across from small dining area has been filled in to secure a safe exit area. Four inch black pipe has been routed and secured to avoid the path of the egress, removing the trip hazard.	3/6/25	
{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 was not conducting fire rehearsals quarterly on each shift and the records do not include a short description of what the rehearsal involved. Findings on February 13, 2025: b. The rehearsal logs do not include 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	{C 189}	Education has been provided to Executive Director and Maintenance Manager on required quarterly fire drills, to include a short description of what rehearsal involved.	3/4/25	

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{C 189}	<p>Continued From page 5</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.</p> <p>(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:</p> <p>3. 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 February 13, 2025:</p> <p>d. Piedmont Hall Soiled Linen - the sprinkler head is not aligned in the opening leaving a hole in the ceiling at one side of the head.</p> <p>f. Piedmont Hall Attic - there is an unsealed cable penetration at the smoke barrier wall. This deficiency could not be examined today; therefore, it must be examined during the next follow-up survey.</p> <p>gg. Main Hall Spa - there was a hole not firestopped as it penetrated the fire-resistance-rated ceiling assembly.</p> <p>Findings on February 13, 2025:</p> <p>a. Kitchen - the hand wash/eye wash sink is leaking heavily around one of the joints. Interview with the Maintenance Director revealed that parts are scheduled to arrive next week.</p> <p>6. 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</p>	{C 189}	<p>3. d - Soiled Linen room sprinkler head has been repaired and hole at one side has been repaired.</p> <p>f. Piedmont Hall Attic - Unsealed cable penetration at the smoke barrier wall has been repaired.</p> <p>gg. Main Hall Spa hole in ceiling assembly has been repaired.</p> <p>Kitchen hand/eye wash sink has been repaired to secure the leaks.</p>	<p>3/6/25</p> <p>3/6/25</p> <p>3/6/25</p> <p>3/6/25</p>	

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{C 189}	Continued From page 7 12. Observations revealed that the plumbing equipment was not maintained in a safe and operating manner. Water Closets must be securely mounted to the floor to maintain seals and prevent water leaks and sewer gas from entering the facility. Findings on February 13, 2025: a. Shared Bath between Rooms 210 and 212 - the toilet was not secure to the floor.	{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 maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build-up humidity that can cause mildew and slick areas and prevents the dissipation of odors.	{C 199}	Toilet shared between room 210 and 212 has been repaired and secured to the floor.	3/6/25

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