

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL016036	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 02/04/2015
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NAME OF PROVIDER OR SUPPLIER PIEDMONT VILLAGE AT NEWTON	STREET ADDRESS, CITY, STATE, ZIP CODE 1345 CHAPMAN LANE NEWTON, NC 28658
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(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
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(C 000)	Initial Comments Report of Follow-up Survey by Dennis Harrell on 2-4-2015. Some deficiencies were not corrected. Further action is required.	(C 000)	CONSTRUCTION SECTION MAR 26 2015 RECEIVED	
(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 plumbing equipment was not maintained in a safe manner by not having all required safety devices. This would affect all staff working around the water heater in the laundry by not protecting them from unexpected scalding hot water. Findings on December 4, 2014: a. In the Water Heater Room in the Laundry, the water heater was missing the pressure relief valve's pipe extension to within 6 inches of the floor. Finding on 2-4-2015: The relief valve had been piped to the floor using PVC pipe. PVC is not rated for use with hot water. The PVC must be replaced with a piping system that is approved for use with hot water.	(C 166)		Relief valve piping has been corrected with C PVC Piping and fittings.

Please Sign Here

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>George Johnson</i>	TITLE Administrator	(X6) DATE 3/25/15
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 02/04/2015
NAME OF PROVIDER OR SUPPLIER PIEDMONT VILLAGE AT NEWTON		STREET ADDRESS, CITY, STATE, ZIP CODE 1345 CHAPMAN LANE NEWTON, NC 28658		
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(C 189)	Continued From page 1	(C 189)		
(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: 2. Based on observations, the Building was not maintained in a safe manner because of breaches through the fire-resistance-rated construction invalidates its integrity. This could affect all residents, staff and visitors if smoke/fire is not contained in Room or compartment of origin. Findings on December 4, 2014: c. The cross-corridor doors had a gap between their meeting stiles varying between 1/8 to 1/2 inches. Finding on 2-4-2015: The cross-corridor doors had not been adjusted or modified to seal the gap between the doors.	(C 189)	A piece of steel flat Bar to be installed to properly seal doors Gap.	3/21/15
(C 189)	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	(C 189)		

Division of Health Service Regulation
STATE FORM

506T22

If continuation sheet 2 of 3

Division of Health Service Regulation

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(C 199)	<p>Continued From page 2</p> <p>before April 1, 1984, with natural ventilation in these specified spaces:</p> <ul style="list-style-type: none"> (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. <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>1. Based on Observation, the facility failed to provide an environment in accordance with this Rule by not ventilating area where odors are generated or maintaining equipment/systems. This could affect all residents, staff and visitors by subjecting them to odors.</p> <p>Findings on December 4, 2014:</p> <p>a. The spot exhaust fans did not work and there was no window in the following rooms:</p> <ul style="list-style-type: none"> i. Dining Room Toilet Room, ii. Lower Individual Toilet Room, iii. Lower Hall Group Shower Room, iv. Lower Hall Ladies Toilet Room, v. Upper Hall Ladies Toilet Room. <p>Findings on 2-4-2015: The listed exhaust fans were still not working.</p>	(C 199)	<p>All fans to be fully operational</p>	<p>4/15/15</p>
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