

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL043009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/17/2015
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NAME OF PROVIDER OR SUPPLIER UNPRECEDENTED CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 157 STEWART ROAD DUNN, NC 28334
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C 000	<p>Initial Comments</p> <p>Report of a Biennial Construction Survey by Ed Miller and Greg Cates on September 17, 2015.</p> <p>Records indicate that this facility was first licensed on March 11, 1985. The facility is currently licensed for 12 Adult Care Home Beds. Based on this information, we are requiring the facility to meet the 1984 Rules Homes For The Aged and Disabled and Minimum Standards and Regulations, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or more Beds, and the 1978 Edition Volume 1 of the North Carolina State Building Code Section 409.1- Institutional Occupancy.</p> <p>Physical plant deficiencies were noted which require a plan of correction</p>	C 000		
C 132	<p>Bathrooms-Must Provide Privacy</p> <p>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;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that all Bathrooms and Toilet Rooms are designed to provide privacy when they have more than one commode, and at each tub or shower. Findings on September 17, 2015: a. In the Back Shower room, the shower was</p>	C 132		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 132	Continued From page 1 not equipped with a curtain.	C 132		
C 143	<p>Janitor's Closets-Locked</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(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 shall be monitored while in use;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not having locked areas to contain substances which may be hazardous if ingested, inhaled or handled. This deficiency affects all residents, who may accidentally use or come in contact with one of these hazardous substances. Findings on September 17, 2015: a. Janitor and hopper Rooms were unlocked.</p>	C 143		
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</p>	C 160		

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C 160	Continued From page 2 were not maintained in a clean and safe condition. This could affect all residents, staff and visitors if the grounds are not free of obstructions, tripping hazards or have equipment in disrepair. Findings on September 17, 2015: a. The back patio was cluttered with stuff. b. The roof and some decking may be at the end of its service life as evident by missing tabs and multiple ceiling stains.	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. Based on Observation, the facility failed to have walls, ceilings, and floors or floor coverings, kept clean and in good repair. Findings on September 17, 2015: a. Above the tub surround in Bedroom 8's Bathroom, the gypsum wallboard was covered in mold. b. The paint in Bedroom 8's Bathroom, was peeling, c. The ceiling was stained in Bedroom 5's Bathroom, d. The ceiling was stained in Tub Room above the door, e. The ceiling was stained in Bedroom 2, f. The floor tile around the fixtures were dirty in	C 164		

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C 164	<p>Continued From page 3</p> <p>the Tub Room.</p> <p>g. The ceiling was stained near the Kitchen.</p> <p>h. The VCT joints in the Kitchen are relatively large.</p> <p>i. The metal exterior Kitchen Door needs to be refinished.</p> <p>j. Women Visitor Toilet room had a hole and stain in the ceiling</p> <p>k. Men Visitor Toilet Room had a stained ceiling</p> <p>l. The ceiling in the Hopper Room and Janitor Room needs Painting,</p> <p>2. Based on Observation, the facility failed to prevent chronic unpleasant odors. This would affect all residents, staff and visitors by exposing them to unpleasant environment. Findings on September 17, 2015:</p> <p>a. Bedroom 7 had a strong odor,</p> <p>b. Bedroom 5 had a strong odor.</p> <p>3. Based on Observation, the facility failed to have furniture kept clean and in good repair. Findings on September 17, 2015:</p> <p>a. The following nightstands and or dresser were stain and need refinishing</p> <p>i. Bedroom 5, nightstand and dresser,</p> <p>ii. Bedroom 6, nightstand,</p> <p>iii. Bedroom 1, nightstand and dresser</p>	C 164		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</p> <p>(e) This Rule shall apply to new and existing</p>	C 166		

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C 166	Continued From page 4 facilities. This Rule is not met as evidenced by: 1. Based on observation, record review and interview the facility failed to provide an environment in accordance with this Rule by allowing bees to remain unmanaged. Findings on September 17, 2015: a. Under the awning on the left and right side, there were bee's nests.	C 166		
C 174	Bedroom Furnishings-Table, Mirror, Chairs SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (2) a bedside type table; (3) chest of drawers or bureau when not provided as built-ins, or a double chest of drawers or double dresser for two residents; (4) a wall or dresser mirror that can be used by each resident; (5) a minimum of one comfortable chair (rocker or straight, arm or without arms, as preferred by resident), high enough from floor for easy rising; (6) additional chairs available, as needed, for use by visitors; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility has failed to provide resident rooms with the required furniture for the number of residents. This could affect all residents, by providing an institutional setting instead of a homelike setting.	C 174		

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C 174	Continued From page 5 Findings on September 17, 2015: a. Many resident rooms lacked a sufficient quantity of comfortable armchairs for the number of residents in the room. Locations of specific examples include but are not limited to: i. Bedroom 5, 2 Residents Capacity: 0 Chair ii. Bedroom 6, 2 Residents Capacity: 0 Chair, 0 Dresser iii. Bedroom 4, 2 Residents Capacity: 0 Chair iv. Bedroom 3, 2 Residents Capacity: 0 Chair v. Bedroom 2, 2 Residents Capacity: 0 Chair vi. Bedroom 1, 2 Residents Capacity: 0 No Comfortable Chair	C 174		
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 provide and/or maintain the fire extinguishers and associated equipment. This would affect all residents, staff and visitors by not having emergency equipment in proper working order. Findings on September 17, 2015: a. Throughout the building, the portable fire extinguisher's annual maintenance was last performed on September 2011 and no monthly inspection have been performed.	C 183		
C 184	Fire Safety-Evacuation plan	C 184		

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C 184	<p>Continued From page 6</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(a) A written fire evacuation plan (including a diagrammed drawing) which has the written approval of the local Code Enforcement Official shall be prepared in large print and posted in a central location on each floor of an adult care home. The plan shall be reviewed with each resident on admission and shall be a part of the orientation for all new staff.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on Observation, the building failed to properly post and maintain the evacuation diagrams. This would affect all residents, staff and visitors by not providing proper guidance during an emergency.</p> <p>Findings on September 17, 2015:</p> <p>a. The mounted evacuation diagram in the corridor near left exit was improperly oriented.</p>	C 184		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</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>	C 189		

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C 189	<p>Continued From page 7</p> <p>1. Base on observation, the fire alarm panel was showing a trouble signal. Facility staff were not knowledgeable of the system and no document were available showing the Fire Alarm system is being maintained. No fire alarm test was performed.</p> <p>2. Based on observation, the Building was not maintained in a safe and operating condition, because the emergency lighting, which illuminates the egress pathways during power outages, did not work properly. This would affect all residents, staff and visitors if the egress pathways were not illuminated during the power outages and there was no other illumination. Findings on September 17, 2015:</p> <p>a. The wall-mounted self-contained emergency light did not work on backup power when the test button was pushed. Locations of specific examples include but are not limited to:</p> <ul style="list-style-type: none"> i. Corridor near left Exit, ii. Corridor near Dining iii. Back light in Dining Room. iv. Living Room. <p>b. The left headlight on the wall-mounted self-contained emergency light near the Tub Room did not work on backup power when the test button was pushed.</p> <p>3. Based on observation, the Building was not maintained in a safe and operating condition, because the exit sign did not work or relay directional information properly. This would affect all residents, staff and visitors if they could not promptly find their way to an exit during an emergency. Findings on September 17, 2015:</p> <p>a. The exit sign in the Living Room did not work on backup power when tested.</p>	C 189		

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C 189	<p>Continued From page 8</p> <p>4. Based on observations, the Building was not maintained in a safe and operating condition, because breaches through the fire-resistance-rated construction invalidated its integrity. This could affect all residents, staff and visitors if smoke/fire is not contained in Room or compartment of origin. Findings on September 17, 2015:</p> <ul style="list-style-type: none"> a. There were gaps around cables that penetrate through the fire-resistance-rated ceiling assembly. Locations of specific examples include but are not limited to: <ul style="list-style-type: none"> i. Left Exit, ii. Empty closet in Bedroom 7, iii. Pantry. c. The listed ceiling radiation damper in the HVAC duct penetration near the left Exit has been sprayed with textured ceiling. <p>5. Based on Observation, the Building was not maintained in a safe and operating condition, because some corridor doors were held open by devices that do not release with a push or pull of the door, preventing the doors from being closed and latched rapidly. This could affect all residents, staff and visitors by not containing smoke and fire in the room of origin. Findings on September 17, 2015:</p> <ul style="list-style-type: none"> a. Most of the corridor door from the Bedroom had wedge sitting on the floor. <p>6. Based on observation, the facility failed to maintain Building after damage from a water leak. This could affect all residents, staff and visitors by not containing smoke and fire in the room or smoke compartment of origin Findings on September 17, 2015:</p> <ul style="list-style-type: none"> a. Complete installing and finishing the Kitchen Ceiling, 	C 189		

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C 189	<p>Continued From page 9</p> <p>b. Install the four lights fixtures in the ceiling of the Kitchen. Assure to provide proper fire protection of the openings,</p> <p>c. Add missing heat detector to the Kitchen, integrated into the fire alarm system.</p> <p>d. Secure the dangling Exit sign in the Kitchen.</p> <p>7. Based on Observation, the facility failed to provide an environment in accordance with this Rule. This rule is not being met because facility equipment is not being maintained in a safe operating manner. This would affect all residents, staff and visitors, if equipment in disrepair injury someone.</p> <p>Findings on September 17, 2015:</p> <p>a. In the Back Shower Room, the tub was missing its nurse call switch and cover plate,</p> <p>b. In the Back Shower Room ,the light above the sink was missing its globe,</p> <p>c. In the Back Shower Room, the light switch with an electrical power receptacle combination fixture was missing its cover plate.</p> <p>d. In the Water Heater Room there was a double switch light switch, missing its cover plate.</p> <p>e. In the hopper room, the hopper sink's plumbing trap was dried-up, allowing sewer gases to enter the Building.</p>	C 189		
C 191	<p>Unvented & Portable Elec. Heaters Prohibited</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances.</p> <p>(2) Unvented fuel burning room heaters and</p>	C 191		

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C 191	<p>Continued From page 10</p> <p>portable electric heaters are prohibited. (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 facility failed to prevent the use of unvented & portable electrical heater in the facility. This could affect all residents, staff and visitors if heater were the ignition source of a fire. The danger increases if used by resident or combustible material were near. Findings on September 17, 2015: a. A portable electric heater was found in the Bedroom 3.</p>	C 191		
C 199	<p>Exhaust Ventilation</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to</p>	C 199		

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C 199	Continued From page 11 provide an environment in accordance with this Rule by not maintaining the ventilation equipment/components good working order. This could affect all residents, staff and visitors by subjecting them to rapidly moving mechanical parts that could infect bodily harm. Findings on September 17, 2015: a. The exhaust fan was missing it grille in Bedroom 8's Bathroom.	C 199		