

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL059021</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/09/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CEDARBROOK RESIDENTIAL CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1267 PINNACLE CHURCH ROAD NEBO, NC 28761</b>
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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 Biennial Construction Survey by Dennis Harrell on 11-9-2015. A Complaint/Fire investigation and another Complaint survey was conducted at the same time.

Records indicate that this facility was first licensed on 5-2-1973. The facility is currently licensed for 80 residents. Based on this information we are requiring the facility to meet the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, applicable portions of the 2005 Regulations for Adult Care Homes, and the 1987 North Carolina State Building Code Section 407.1, Group D-2 Institutional Occupancy.

Deficiencies were cited that will require a plan of correction.

Note: The findings from the Complaint Survey are also incorporated in this Statement of Deficiencies.

**C 000**

**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;

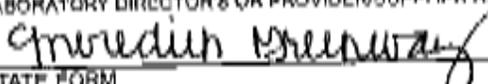
(c) This Rule shall apply to new and existing facilities.

This Rule is not met as evidenced by:

1. Based on observation, the facility failed to be maintained clean.

**C 164**

(see next page)

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE <b>Operations Manager</b>	(X6) DATE <b>12/23/15</b>
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HAL069021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  11/09/2015
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NAME OF PROVIDER OR SUPPLIER  CEDAR BROOK RESIDENTIAL CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1267 PINNACLE CHURCH ROAD NEBO, NC 28751
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C 164	<p>Continued From page 1</p> <p>Findings include:</p> <p>a. Many corridor doors were stained and needed cleaning.</p> <p>b. Floors were stained and/or discolored around toilets and at door frames.</p> <p>c. Trash was found on the floor behind some toilets.</p> <p>2. Based on observation, the facility failed to be maintained in good repair.</p> <p>Findings include:</p> <p>a. A window was broken in the dining room.</p> <p>b. Some bedroom windows were broken.</p> <p>c. Some window screens were bent, broken or out.</p> <p>d. There was a broken toilet in the 300 Odd bath.</p> <p>e. The door to room 306 was damaged beyond repair.</p> <p>f. The door to the closet off room 309 was damaged with splinters exposed.</p> <p>g. Several window sills were partially deteriorated on the outside.</p> <p>3. Based on observation the facility failed to be maintained clean due to the presence of insects.</p> <p>Findings include:</p> <p>a. One roach was observed in the 100 Hall bathroom.</p> <p>b. One roach was observed in room 410.</p> <p>c. Spiders were observed in the ceiling in closets in room 101 and 205.</p>	C 164	<p>1. Housekeeping along with additional contracted workers are cleaning floors with cleaner designed to remove stains as well as using other methods to refinish flooring.</p> <p>2. Area d - This has been completed.</p> <p>Area b - This has been completed.</p> <p>Area c - This has been completed.</p> <p>Area d - This has been completed.</p> <p>Area e - Door has been ordered and scheduled to be delivered 12/28/15.</p> <p>Area f - Door has been repaired.</p> <p>Area g - Maintenance is working on reports to window seals.</p>	<p>11/28/15</p> <p>11/20/15</p> <p>11/20/15</p> <p>11/20/15</p> <p>ongoing as identified</p> <p>11/23/15</p> <p>1/11/16</p> <p>11/23/15</p>
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</p>	C 166	<p>3. Orkin has inspected and treated.</p>	<p>1/11/16</p> <p>11/13/15, 12/18/15, 12/21/15 &amp; ongoing</p>

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C 188	Continued From page 2  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 did not maintain the home free of hazards associated with unsupervised smoking.  Findings include: a. There was a smell of tobacco smoke in a bedroom on the 400 Hall. b. Some bedroom and bathroom window screens were bent outward, removed or cut. c. There were cigarette butts on the ground outside many of the damaged window screens.	C 188	1. Area a - Facility will continue to enforce smoking policy and place residents found smoking on increased supervision. (ongoing)  Area b - Maintenance has identified damaged window screens. Some have already been repaired and 1/5/15 other repairs are being made.  Area c - Housekeeping staff will continue to monitor for evidence of smoking outside resident windows. (ongoing)	
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, the facility was not maintained in a safe manner because one of the smoke barrier doors is sometimes blocked from opening properly. This could affect all residents and staff by not being able to move freely from the fire compartment of origin.	C 189	We will hold another resident council meeting to review smoking and other facility policies to stress to residents the importance of following facility smoking policies 1/8/15	

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C 189	<p>Continued From page 3</p> <p>Finding includes: The door closer arm drops down and sometimes prevents the smoke barrier door near the dining room from opening fully.</p> <p>2. Based on observation, many corridor doors are not closing well and/or latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include: a. The smoke barrier door near room 201 did not latch when closed by activation of the fire alarm system, b. The door to room 308 is damaged beyond repair, c. The latch strike plate is missing on the smoke barrier door near the laundry, d. The door to the bathroom off room 309 is damaged with splinters exposed, e. The door to the corridor bathroom across from room 404 is hard to close.</p> <p>3. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. Several holes in ceiling of boiler room on 100 Hall, b. Unsealed 2 inch sleeve in ceiling of laundry, c. Gap where edge of ceiling meets wall in clean linen by room 300, d. Gap where edge of ceiling meets wall in closet off room 300,</p>	C 189	<p>-This door has been repaired 11/21/15</p> <p>2. Area a - This has been completed. 11/21/15 Area b - The door has been ordered and is scheduled to be delivered 1/11/16 12/28/15. Area c - This has been completed 12/21/15 Area d - This has been completed. 11/23/15 Area e - This has been completed. 11/25/15</p> <p>3. Area a - This will be completed. 1/5/16 Area b - This has been completed 11/24/15 Area c - This has been completed. 12/3/15 Area d - This has been completed. 11/27/15</p>	
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C 189 Continued From page 4

e. Hole in ceiling of boiler room behind kitchen,  
f. Unrated foam used to seal hole in ceiling in room 107,  
g. Unrated foam used to seal hole in ceiling in room 208.

4. Based on observation, the facility was not maintained in a safe condition because of exposed electrical wiring. Exposed electrical wiring presents a shock or electrocution risk. Findings include:  
a. There was wiring exposed on a ceiling light fixture in the area behind the Activity Director's office.  
b. There were open spaces in the electric panel in the corridor by the 300 Odd Bath  
c. There was an open electrical junction box in the ceiling of the laundry.  
d. There was a receptacle plate missing in the employee break room.

5. Based on observation, the facility was not maintained in a proper operation condition because of a leaking roof. A leaking roof can cause unhealthy living conditions below. Finding includes:  
a. The roof was leaking at 4 places in the kitchen.  
b. The roof was leaking at the brick fire wall in room 210.  
c. The gutters were clogged and overflowing. Clogged gutters can contribute to a leaking roof.

6. Based on observation, some windows were broken. Broken windows present sharp edges and can allow pests to enter the facility. Findings include:  
a. A window was broken in the dining room.  
b. Some bedroom windows were broken.

C 189

Area e - This has been repaired. 11/24/15  
Area f - This will be completed 12/23/15  
Area g - This will be completed. 12/23/15

A. Area a - This will be completed. 1/8/15  
Area b - This has been corrected 11/21/15  
Area c - This has been corrected. 11/23/15  
Area d - This has been corrected. 11/24/15

5. Area a - Areas of roof causing leak in kitchen area have been repaired 12/18/15  
Area b - Area of roof causing leak in room 210 has been repaired. 12/18/15  
Area c - Gutters have been cleaned/unclogged. 11/13/15

G. Area a - window has been replaced 11/20/15  
identified broken 11/20/15  
Area b - windows replaced ongoing

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C 189 Continued From page 5

7. Based on observation there was a broken toilet in the 300 Odd bath. Broken toilets present sharp edges and can cause leaking and/or fall hazards.

C 189

7. Toilet has been replaced.

11/23/15

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:  
Based on observation the facility failed to maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly bacteria.

Findings include:

- a. The exhaust grill was clogged in the hall bathroom near room 101.
- b. The exhaust grill was clogged in the adjacent hall bathroom.

C 199

Area a + Area b -  
Maintenance has  
began working on  
cleaning exhaust  
grills.

12/28/15