

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL074038 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____ | (X3) DATE SURVEY COMPLETED R-C 10/21/2015 |
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

SOUTHERN LIVING ASSISTED CARE

2080 WEST FIFTH STREET
GREENVILLE, NC 27836

| (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 This report is of a Followup Survey done by Bob Getohell on October 21, 2015. The followup survey revealed that all deficiencies have not been completed, therefore a new plan of correction is required. | (C 000) | <u>Corrective Action Already Taken:</u> Floor Tech began at one end of the hall working to the other end, per schedule and completion w/in set timeline. Floor tech was out sick 3 days and missed | |
| (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 observations, the facility failed to maintain the floors clean and in good repair. Followup Findings on October 21, 2015: a. Throughout the facility Resident Rooms' floors were very dirty, and there was an excessive amount of wax and dirt build-up around the door frames, and where the floors meet the wall base. b. Some of the recently cleaned room floors still had stains and spots that were missed when cleaning operations were performed. c. Some of the recently cleaned room floors had adjacent areas under furniture and other items that had not been cleaned. d. Some of the recently cleaned room's floors had adjacent closets that had not been cleaned or still had stains and spots that were missed when cleaning operations were performed. | (C 164) | Rooms that Inspector saw. ALL rooms have been Stripped, Waxed after all furniture was totally removed. All rooms are being maintained with specific attention to wax build-up, stains and spots. All furniture has been cleaned and polished. Closets have been emptied, buffed, baseboards scrubbed, painted. Each closet has been set up with a clothes bin and a shoe bin, easy to remove for Daily cleaning. <u>Changes to prevent recurrence:</u> Each room is on a Cleaning schedule. <u>Corrective Action Monitoring:</u> Sporadic inspections of Housecleaning Results are performed weekly by RCC and / or Administrator. <u>Completion Date:</u> 10.23.2015 | 10.23.2015 |

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

Cynthia DeJoy TITLE Administrator

(X5) DATE

12.1.2015

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| NAME OF PROVIDER OR SUPPLIER SOUTHERN LIVING ASSISTED CARE | STREET ADDRESS, CITY, STATE, ZIP CODE 2060 WEST FIFTH STREET GREENVILLE, NC 27835 |
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| (C 164) | Continued From page 1 2. Based on observations, the facility failed to maintain the walls clean and in good repair. Followup Findings on October 21, 2015: a. The walls, and base boards in the Resident Rooms including Closets and Resident Room Toilet Rooms were not clean and in good repair. | (C 164) | <u>Corrective Action Already Taken:</u> Resident Room Walls and baseboards have been freshly painted. Resident Closets and Baseboards have been freshly painted. Resident Bedroom Bathrooms have new FIP behind the toilet areas and remaining Bath Wall. | |
| (C 165) | Housekeeping and Furnishings-Sanitation Grade SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review, and interview with Administrator the facility failed to maintain a sanitation scores of 85 or above at all times in accordance with this Rule. | (C 165) | space has been freshly painted. <u>CLAIMS TO AVOID / OCCURRENCE:</u> Additional Employee hired to upkeep painting maintenance. <u>Corrective Action Identified:</u> Each room is on a rotating inspection, performed weekly by RCC and / or Administrator. <u>Completion Date:</u> 10-23-2015 | 10-23-2015 |
| (C 165) | SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review, and interview with Administrator the facility failed to maintain a sanitation scores of 85 or above at all times in accordance with this Rule. Followup Findings on October 21, 2015: a. A Sanitation report by the Pitt County Environmental Health Department documented a score of 70.5 during a re-inspection of the facility | (C 165) | <u>Corrective Action Identified:</u> Each room is on a rotating inspection, performed weekly by RCC and / or Administrator. <u>Completion Date:</u> 10-23-2015 <u>Corrective Action Already Taken:</u> Corrective Actions were immediately and already underway during timeframe of prior inspection. <u>CLAIMS TO AVOID / OCCURRENCE:</u> Physical Building Improvements have been performed. Check systems have been implemented to ensure continued maintenance of these improvements and of general cleanliness, furniture upkeep and odor prevention. <u>Corrective Action Identified:</u> Building is on a rotating inspection, performed weekly by RCC and / or Administrator. <u>Completion Date:</u> 10-23-2015 | 10-23-2015 |

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| (C 165) | Continued From page 2 that was performed on August 13, 2015. | (C 165) | <u>Corrective Action Already Taken:</u> First shift, second shift as well as Third 2ND Employees have been interviewed On topic of De-cluttering resident Rooms during Employee's shift Service. Specifically to per diem staff, but on each shift. | |
| (C 166) | Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS | (C 166) | <u>Remove clothes from Resident</u> <u>Chairs and Hugs or Feet into Resident</u> <u>Drawers properly.</u> <u>To organize resident belongings in a way that leaves only furniture on the room floor and only 4 clothes hanger</u> <u>And a shoe bin on the closet floor.</u> <u>CHANGES TO STANDARD/PROCEDURE:</u> <u>Staff in-service</u> <u>Corrective Action Monitored:</u> <u>Walk-unit inspection performed daily</u> <u>By RCC and / or Administration.</u> <u>Completion Date: 10.23.2015</u> | 10.23.2015 |
| | (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (c) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility has not ensured that all resident rooms remain uncluttered. Followup Findings on October 21, 2015: a. Most resident rooms that have not been clean were cluttered with residents' clothes and other belongings stacked on the floor or on a chair. 2. Based on observation, the facility failed to provide an environment free of hazards by allowing roaches to remain unmanaged. Followup Findings on October 21, 2015: a. Dead and alive roaches were observed in the front section of the 100 Hall. Pest exterminator was on site. 3. Based on Observation, the facility failed to provide an environment free of hazards, by not maintaining the HVAC/ventilation, grilles and their associated dampers. | | <u>Corrective Action Already Taken:</u> <u>New Pest Inspection company hired.</u> <u>Initial Full Building Treatment</u> <u>August 2015. Invoice dated</u> <u>11.04.2015: No pest activity found.</u> <u>CHANGES TO STANDARD/PROCEDURE:</u> <u>Scheduled for monthly service.</u> <u>Corrective Action Monitored:</u> <u>Staff instructed to notify RCC and / or Administrator of ANY INFESTIONS, Daily.</u> <u>All shifts, Anytime.</u> <u>Completion Date: 10.23.2015</u> | 10.23.2015 |

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| (C 166) | Continued From page 3 Followup Findings on October 21, 2015: a. The return HVAC and ventilation grilles and their radiation dampers have an excessive accumulation of dust/lint thought-out the Facility. | (C 166) | <u>Corrective Action Already Taken:</u> Communication for HVAC cleaning 09.2015. Quote Received 10.21.2015. ALL units Cleaned by outside Contractor Completed on 10.26.2015 | |
| | | | <u>Changes to prevent reoccurrence:</u> Scheduled Maintenance with same Service. <u>Corrective Action Monitoring:</u> Scheduled with same Service For periodic monitoring. <u>Completion Date:</u> 10.23.2015 | 10.23.2015 |