

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL079002 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____ | (X3) DATE SURVEY COMPLETED 02/25/2016 |
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| NAME OF PROVIDER OR SUPPLIER HIGHGROVE LONG TERM CARE CENTER | STREET ADDRESS, CITY, STATE, ZIP CODE 2135 S SCALES STREET REIDSVILLE, NC 27320 |
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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 |
|--------------------|--|---------------|---|--------------------|
| C 000 | <p>Initial Comments</p> <p>Report of a Biennial Construction Survey by Frank Strickland on 02/25/2016:</p> <p>Information obtained from the DHSR database indicates that this facility was licensed on 11/18/1987 as a HA. This facility is currently licensed for 62 Beds. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1978 (Revision 8) Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1987 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure.</p> <p>Deficiencies have been cited and a Plan of Correction is required.</p> | C 000 | | |
| 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:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(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 facility has not maintained and serviced the HVAC supply and return air grilles. This will effect all residents and staff.</p> <p>Findings on 02/25/2016:</p> | C 164 | | |

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

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| C 164 | Continued From page 1 The return-air grilles have excessive particulate build-up in the Dining Hall. | C 164 | | |
| 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: 1-Based on observation, the facility was not maintained in a safe manner due to breaches of the one-hour roof/ceiling assembly construction that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 02/25/2016: The following location(s) have breaches in the ceiling and wall construction: (a) The ceiling has piping penetrations that are not sealed with a fire-rated material that are located in the Activity Director's Office closet. (b) The corridor side wall has piping penetrations that are not sealed with a fire-rated material that are located in the Activity Director's Office closet. (c) The exterior Mechanical Rooms that have AHU #1 & #3 have openings in the ceilings around ductwork due to unfastened metal angles and duct insulation.</p> | C 189 | | |

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| C 189 | <p>Continued From page 2</p> <p>2-Based on observations, the facility fire protection equipment incorporated in the HVAC system was not maintained in a safe manner. This could effect all residents and staff by not providing full detection of smoke in the facility.</p> <p>Findings on 02/25/2016: The duct smoke detector sampling tubes have excessive particulate build-up for AHU's #1, #2 & #3 that are located in the rear exterior Mechanical Rooms.</p> <p>3-Based on observations, the facility has not maintained in a safe and operating condition by failing to ensure that egress from all areas can be done without the use of keys, tools or special knowledge or effort. This could affect residents, staff or visitors if someone becomes trapped in a space accidentally.</p> <p>Findings on 02/25/2016: The Med Closet has a 2.5 inch steel hasp lock beside locking doorset.</p> | C 189 | | |