

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL092203</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>04/19/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CHATHAM COMMONS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>809 WEST CHATHAM STREET CARY, NC 27512</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	<p>Initial Comments</p> <p>Report of Complaint Survey by Ed Miller and Frank Strickland on April 19, 2016. A Biennial Construction Survey was completed at the same time.</p> <p>The Complaint alleged that the facility did not have a clean and orderly environment, had unpleasant odors, and was not free of hazards.</p> <p>Records indicate this facility was first licensed on November 1, 1982 as a Home for the Aged. This facility is currently licensed for 80 Beds (including a 30 Bed Special Care Unit). Therefore, this facility was surveyed for conformance with the 1977 Minimum Standards and Regulations for Homes for the Aged, the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and the 1978 (Revision 5) Edition, of the North Carolina State Building Code(s), Institutional Occupancy.</p> <p>Some of the Complaint was substantiated.</p> <p>Deficiencies were cited which will require a plan of correction.</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>	C 164		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 164	Continued From page 1  This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to control the spread of chronic unpleasant odors. This would affect all residents, staff and visitors by exposing them to an unpleasant environment. Findings on April 19, 2016: a. The Library is adjacent to a screened porch used as the designated smoking area and has a direct access via an exterior door. The smoke and odors from the smoking area drifts into the Library and down the Corridor. The smoking area has an exhaust fan located just outside the door but this fan vents into the attic. In addition, the door has a fly fan that starts up when the door opens that is possibly contributing to the smoke/odor drifting into the Library.	C 164		
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 was not maintained free of hazards. Findings on April 19, 2016: a. Bedrooms throughout the building - Many towel bars were missing and the mounting brackets were left attached to the door exposing sharp and rough edges.	C 166		

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D 324  D 324	Continued From page 2  10A NCAC 13F .0906 (d) Other Resident Care And Services  10A NCAC 13F .0906 Other Resident Care And Services  (d) Telephone. (1) A telephone shall be available in a location providing privacy for residents to make and receive calls. (2) A pay station telephone is not acceptable for local calls; and (3) It is not the home's obligation to pay for a resident's toll calls  This Rule is not met as evidenced by: 1. Based on Observation, the Facility did not always provide access to a telephone. Findings on April 19, 2016: a. Telephone Room - the corridor door had paper stuffed in the strike plate and covered with tape preventing the door from latching closed. The paper and tape was removed so the corridor door can latch as is required by Building Code. When the door closes it locks and there are no keys. When the door is closed and locked, access to the telephone is denied.	D 324  D 324		