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PRINTED: 05/18/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL031017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/11/2016
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NAME OF PROVIDER OR SUPPLIER DAYSPRING OF WALLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 4026 HIGHWAY 11 SOUTH WALLACE, NC 28466
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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	Initial Comments Report of Biennial Construction Survey by Frank Strickland and Billy Bryant on 05/11/2016: Records indicated that this facility was licensed on 07/22/1997 for 80 BEDSS w/(30 BED SCU). Therefore, we are requiring the facility to meet the 1996 Rules for the Licensing of Adult Care Homes. The North Carolina State Building Code Volume I-General Construction 1996 Edition - Institutional - Group I-Unrestrained Occupancy. Deficiencies were cited and a Plan of Correction is required.	C 000		
C 101	Existing Licensed Fac- No less than 71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1-Based on observations, this facility has not maintained the measures for the Special Locking	C 101		

CONSTRUCTION SECTION
JUN 08 2016
RECEIVED

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>[Signature]</i>	TITLE Administrator	(X6) DATE 6-7-16
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C 101	<p>Continued From page 1</p> <p>(magnetic locks) on the exit doors as allowed by Section 1012.6 of the 1996 NC State Building Code. Section 1012.6.1. 4. F. requires, "If any required emergency release switch is of the locking type, all staff must carry emergency release switch keys."</p> <p>Findings on 05/11/2016: The required emergency release switch located at each magnetically locked exit door was of the locking type with keyed switching that all staff in the SCU were not carrying. The med tech was the only staff member carrying a release switch key and the other staff that were interviewed carried no release switch keys. All staff who are responsible for the evacuation of the occupants must carry an emergency release key at all times when on duty.</p>	C 101	<p><i>Keys were made for each individual team member in the SCU</i></p>	6-2-16
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: (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.</p> <p>This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained the wood veneer and finishes of the interior doors.</p> <p>Findings on 05/11/2016: Listed below are interior wood doors that are either scratched and/or have damaged veneer</p>	C 166		

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C 166	Continued From page 2 edges at the hinges: (a) Room 111 (b) Room 112 (c) Kitchen Entry door across the hall from Main Laundry (d) Living Room entry doors from hall (e) Dining Room doors	C 166	<i>Item requested & ordered Expected delivery & installation of "ACROVYN" material</i>	6-30-16
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 has not maintained in a safe and operating condition of interior doors that do not latch preventing the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire. Findings on 05/11/2016: The following noted doors do not latch or operate properly: (a) Rooms 203 & 211 (b) Main Laundry door drags and the closure is unattached to the door. (c) Kitchen Pantry door drags (d) Sprinkler Riser Room door (e) Kitchen/Dining Hall door	C 189	<i>#2031511 Replaced strike plate Laundry Door - Adjusted stop Kitchen Door - Ripped Corner Sprinkler Door - Removed tape from latch Kitchen/Dining - Attached Door closed</i>	5/18/16 6/1/16 6/1/16 5/16/16 5/16/16

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C 199	<p>Exhaust Ventilation</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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;</p> <p>(1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area.</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, this facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff by subjecting them to house-keeping odors.</p> <p>Findings on 05/11/2016: The mechanical exhaust fans are not exhausting interior air in the following locations: (a) All of the Resident Bathrooms in the 300 Hall (b) Chemical Storage Room in the 300 Hall</p> <p>2-Based on observation, this facility has failed to maintain the service and cleaning of HVAC air distribution grilles and duct housings. This could affect the residents and staff by not provide clean conditioned air.</p> <p>Findings on 05/11/2016: The following HVAC supply and return-air grilles</p>	C 199	<p>Replaced belt in 300 Hall Bathroom relocated chemicals</p>	<p>5/23/16 5/16/16</p>

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C 199	Continued From page 4 are not clean, excessive particulate build-up and finishes are peeling and/or rusted: (a) Kitchen Pantry grilles are rusted (b) Kitchen return-air grilles have excessive grease build-up. (c) Kitchen Mop sink Closet (d) Med Room in the 100 Hall (e) Room 111	C 199	All Grilles have been removed, pressure washed, painted & reinstalled	5/20/16
			Continued Monitoring of deficiencies and building upkeep and maintenance	ongoing