

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL039014</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/12/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SUMMIT COMMUNITIES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>904 RALEIGH STREET OXFORD, NC 27565</b>
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C 000	<p>Initial Comments</p> <p>Report of a Biennial Construction Survey by Ed Miller on July 12, 2016.</p> <p>Record indicate that the facility was licensure on November 1, 1974 as an Adult Care Home for Sixty (60 ) Residents. Due to the above information, the facility is required to meet the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds; the 1971 Minimum Standards and Regulations for Homes for the Aged; and the 1967 North Carolina State Building Code, Group D-2 Institutional Occupancy.</p> <p>Deficiencies were noted which require a Plan of Correction.</p>	C 000		
C 111	<p>Must Have Current San. &amp; Fire Safety Reports</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION( f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: 1. Based on record review, and interview with Maintenance Director and Facility Manager, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. This deficiency affects residents, staff and visitors by not preventing any systems deficiency that may be discovered with annual inspections. Findings on July 12, 2016: a. The current annual Fire Marshal Inspection Report was not available for review.</p>	C 111		

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

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C 111	Continued From page 1  b. The current Annual Fire Alarm System Inspection and Testing Report in accordance with NFPA 72, was not available for review.	C 111		
C 133	Bathrooms-Hand Grips  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents;  This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide commodes, tubs and showers accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on July 12, 2016: a. Men's Bathroom 100 Hall front section - there were no hand grips (grab bar) for the tub.	C 133		
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.	C 164		

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C 164	Continued From page 2  This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to keep walls, ceilings, floors or floor coverings and furniture clean and in good repair. Findings on July 12, 2016: a. Corridors Throughout the Facility - the VCT floor covering was dirty, especially at the intersection with the walls, and around the doorframes, where there was a build-up of wax and dirt.	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, a hazard was present due to the possibility of the backflow of contaminated water into the domestic water supply. Findings on July 12, 2016: a. Men's Bathroom 100 Hall front section - the tub had a shower wand with hose long enough to reach gray water which was not equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing lines. b. Men's shower Room 100 Hall front section - the shower had a shower wand with hose long enough to reach gray water which was not	C 166		

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C 166	Continued From page 3  equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing lines. c. Beauty Shop - the shampoo sink had a sprayer with hose long enough to reach gray water which was not equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing lines.	C 166		
C 183	Fire Extinguishers  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop.  This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to grow larger. This would affect all residents, staff and visitors by not identifying emergency equipment not in proper working order. Findings on July 12, 2016: a. Throughout the building - the last annual maintenance check of the portable fire extinguishers was last performed in June 2015.	C 183		
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,	C 189		

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C 189	<p>Continued From page 4</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect residents, staff and visitors by not providing early detection and activating the fire alarm system. Findings on July 12, 2016: a. HVAC Room #3 - the HVAC duct mounted smoke detector had no access doors to inspect and clean the duct detector's sampling tubes. Dirty sampling tube may become obstructed and my not detect the existence of smoke in the air stream.</p> <p>2. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff and visitors if they could not promptly find their way to an exit during an emergency. Findings on July 12, 2016: a. Front Lobby Exit - the self-luminous exit sign was partially illuminated on normal power making it difficult to read the word "EXIT". Exit signs must be fully illuminated to convey complete information related to the means of egress. b. Kitchen Loading Dock Exit - the self-luminous exit sign was partially illuminated on normal power making it difficult to read the word "EXIT". Exit signs must be fully illuminated to convey complete information related to the means of</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>egress.</p> <p>c. Kitchen Loading Dock Exit - the emergency lighting for this mean of egress was being provided by a single light mounted down the hall against the kitchen wall around the corner.</p> <p>d. HVAC Room #2 (battery location)- the battery supplying the emergency power for the two emergency headlights and two exit signs did not work on backup power when tested. The emergency power system must supply the power needed to illuminate the means of egress and exit signs during power outages.</p> <p>e. HVAC Room #3 (battery location)- the battery supplying the emergency power for the emergency headlights and exit signs did not work on backup power when tested. The emergency power system must supply the power needed to illuminate the means of egress and exit signs during power outages.</p> <p>f. Corridor near Bedroom 207 - the wall-mounted self-contained emergency light did not work on backup power when tested. Emergency lighting must illuminate the means of egress during power outages.</p> <p>3. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, staff and visitors to fire/smoke if not contained in Room or compartment of origin</p> <p>Findings on July 12, 2016:</p> <p>a. Activity Room next to Admin Office - in the Closet there were two open ended sleeves with cables and had gaps around the conduits not firestop as they penetrate the fire-resistance-rated wall construction, allowing the spread of fire and smoke.</p> <p>b. Activity Room next to Admin Office - in the Closet there were gaps around three conduits not firestop as they penetrate the</p>	C 189		

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C 189	<p>Continued From page 6</p> <p>fire-resistance-rated ceiling construction, allowing the spread of fire and smoke.</p> <p>c. Janitor Closet #6 -there were gaps around two metal conduits not firestop as they penetrate the fire-resistance-rated ceiling construction, allowing the spread of fire and smoke.</p> <p>d. Refrigerator Room - behind the four inch conduit on the ceiling there was a gap not firestopped where the wall and ceiling intersect, allowing the spread of fire and smoke.</p> <p>e. Refrigeration Room - the neoprene insulated refrigerant line was not properly firestopped as they penetrate the fire-resistance-rated corridor wall construction, allowing the spread of fire and smoke.</p> <p>f. Water Heater Room near Kitchen -there were gaps around the air vent not firestop as they penetrate the fire-resistance-rated wall and ceiling construction, allowing the spread of fire and smoke.</p> <p>g. HVAC Room near Kitchen - in there was a 2 ½ inch hole not firestopped as they penetrate the fire-resistance-rated ceiling construction, allowing the spread of fire and smoke.</p> <p>h. Beauty Shop - the corridor door had a wedge holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch.</p> <p>i. HVAC Room #4 - the concrete roof structure appears to be constructed with hollow core panels, with a hole for the furnace flue penetrating the structure. This hole traverses the hollow cores and are not firestop, allowing the spread of fire and smoke.</p> <p>j. 200 Hall Bathroom -there was a hole not firestop as it penetrates the fire-resistance-rated ceiling construction, allowing the spread of fire and smoke.</p> <p>k. Electric Room 207- there were five opened ended sleeves with cables and had gaps around</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>the conduits not firestopped as they penetrate the fire-resistance-rated ceiling construction, allowing the spread of fire and smoke.</p> <p>4. Based on observation, the electrical system was not being maintained safe. Findings on July 12, 2016:</p> <ul style="list-style-type: none"> <li>a. Refrigerator Room - kitchen items were being stored directly in front of both electric panels, preventing quick access in any emergency.</li> <li>b. Corridor across for Office with Fire Alarm Panel - med carts were being stored directly in front of both electric panels, preventing quick access in any emergency.</li> <li>c. Kitchen - kitchen item were being stored directly in front of both electric panels, preventing quick access in any emergency.</li> </ul> <p>5. Based on observation, the interior doors were not maintained in a safe and operating condition. Findings on July 12, 2016:</p> <ul style="list-style-type: none"> <li>a. Kitchen - both corridor doors were equipped with only double cylinder dead bolt locks that do not automatically latch into frames when closed.</li> <li>b. Men's Hair Cut - both corridor doors were equipped with only double cylinder dead bolt locks that do not automatically latch into frames when closed.</li> </ul> <p>6. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire extinguishing system lacked the inspections, maintenance and documentation required to ensure a properly working system. This could affect residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on July 12, 2016:</p>	C 189		

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C 189	Continued From page 8  a. Kitchen - Per the commercial kitchen hood's fire extinguishing system semi-annual maintenance tag, its last maintenance check was in June of 2014.	C 189		
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: 1. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff and visitors by preventing the exhausting of odors. Findings on July 12, 2016: a. 200 Hall - the central exhaust ventilation system was not working.	C 199		