

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL026048</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>04/27/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PINE VALLEY ADULT CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3522 CAMDEN ROAD FAYETTEVILLE, NC 28306</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 a Biennial Construction Survey by Frank Strickland on 04/27/2016:</p> <p>Records indicate that this facility was first licensed 04/01/1982 as a Home for the Aged for a capacity of (40) Forty Residents. Based on the above information, the facility was surveyed under the 1978 North Carolina State Building Code - Section 409- Group I- Unrestrained; the 1977 Homes for the Aged and Infirm Minimum and Desired Standards and Regulations; and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds.</p> <p>Deficiencies have been cited and a Plan of Correction is required.</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 observation, the facility has failed to maintain current safety inspection reports for review.</p> <p>Findings on 04/27/2016: The facility does not have current Fire Inspection and Fire Alarm Testing reports on site for review.</p>	C 111	<p><i>Fire Dept has been notified for inspection</i></p>	<p><i>6/15/16</i></p>
C 164	Housekeeping and Furnishings-Clean, Repaired	C 164		

Division of Health Service Regulation

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

*Arlyne Roberson*

TITLE

*owner of bus.*

(X6) DATE

*5/20/16*

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C 164	<p>Continued From page 1</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:</p> <p>1-Based on observation, the facility has not maintained and serviced the plumbing fixtures in the bathrooms.</p> <p>Findings on 04/27/2016: There is a loose toilet that is located in the Women's Bathroom/Long Hall.</p> <p>2-Based on observation, the facility has not maintained the exterior wood finishes of the interior doors.</p> <p>Findings on 04/27/2016: Listed below are interior doors that are either scratched extensively and have damaged edges:</p> <p>(a) Room 6 (b) Room 7 (c) Room 8 (d) Room 14 (e) Unisex Bathroom/Long Hall</p>	C 164	<p><i>Has been done</i></p> <p><i>Building owner is getting bids on getting all doors refinished and kick plate install</i></p>	<p><i>4/29/16</i></p> <p><i>6/30/16</i></p>
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:</p>	C 166		

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C 166	<p>Continued From page 2</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</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 failed to maintain clear paths of egress at exits creating hazards in the event of an emergency evacuation.</p> <p>Findings on 04/27/2016: There are items being stored outside the paths of egress at the following locations: (a) There is a hospital bed and trash bags blocking a clear path located at the exit around the corner from the Nurse's Station. (b) There are wood pallets stacked and card board boxes stacked blocking the path of egress located at the Long Hall exit.</p>	C 166	<p><i>Has been done</i></p>	<p><i>27</i> <i>4/27/16</i></p>
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 observations, the facility emergency illumination has not been maintained in a safe manner. This would affect all residents, staff and</p>	C 189		

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C 189	<p>Continued From page 3</p> <p>visitings guests by not providing illumination in the paths of egress in the event of an emergency.</p> <p>Findings on 0/27/2016: The emergency lighting packs did not illuminate when tested on the emergency mode that are located in the Dining Hall, outside Room 5 and Short Hall.</p> <p>2-Based on observations, the facility emergency exit signage has not been maintained in a safe manner. This would affect all residents, staff and visitings guests by not providing illumination in the paths of egress in the event of an emergency.</p> <p>Findings on 04/27/2016 The emergency exit signage is not illuminated at the Long Hall exterior exit door.</p>	C 189	<p style="text-align: center;">RECEIVED JUN 01 2016 CONSTRUCTION SECTION</p> <p style="text-align: center;"><i>Has been done</i></p>	<p style="text-align: right;"><i>4/29/16</i></p>