

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092203	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 06/10/2016
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NAME OF PROVIDER OR SUPPLIER CHATHAM COMMONS	STREET ADDRESS, CITY, STATE, ZIP CODE 809 WEST CHATHAM STREET CARY, NC 27512
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(C 000)	Initial Comments Report of Biennial Construction Follow-up Survey by Frank Strickland on 06/10/2016: Some cited deficiencies were field verified for correction. However, there are cited deficiencies that require corrective action. A new of Plan of Correction is required.	(C 000)		
(C 184)	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. This Rule is not met as evidenced by: 2-Based on observation, the facility has not maintained and serviced the HVAC supply and return-air grilles to keep them clean. Findings on 06/10/2016: The exhaust grilles have excessive particulate build-up at the following locations: (a) All of the facility Bathroom exhaust fans. (b) Dining Hall return-air grilles. (c) Kitchen return-air grilles. 3-Based on observation, the facility has not maintained the HVAC supply and return-air grilles to keep them in good working condition. Findings on 06/10/2016: The supply diffusers are damaged located at the	(C 184)	The exhaust grilles have been cleaned in all facility bathroom exhaust fans, Dining Hall return air grilles, and kitchen return air grilles have been clean and will be clean on a monthly schedule.	6/17/2016

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Ronald Rogers

TITLE

Executive Director

(X5) DATE

7/6/2016

Division of Health Service Regulation

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{C 164}	Continued From page 1 following locations: (a) Dining Hall (c) Kitchen 6-Based on observation, the facility has not maintained the venting of Laundry appliances in good repair. Findings on 06/10/2016: The Main Laundry dryers do not have back-draft dampers installed on the exterior vent pipes.	{C 164}	Four (4) diffusers have been ordered for the kitchen and dining room. Estimated completion: 7/22/2016 The Main Laundry dryer have had back-draft damper install on the exterior vent pipes.	6/17/2016
{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 facility has not maintained clearances for appliances to floor drains to be free of hazards. This could effect all residents if they wee to became contaminated. Findings on 06/10/2016: The drain line from the ice-maker does not have a 2 inch air-gap from the floor drain located in the Kitchen. Also, the floor drain in from of the ice-maker is not attached to the drain housing. 2-Based on Observation, the Building was not maintained free of hazards.	{C 166}	The drain line from the ice-maker has been corrected to have a 2 inch air-gap from the door drain located in the kitchen. The floor drain has been reattached to the drain housing	6/17/2016

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{C 166}	Continued From page 2 Findings on 06/10/2016: 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. Specific examples include Room 401, 403, 417 and 419.	{C 166}		
{C 175}	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) Individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained towel bars in resident rooms. Findings on 06/10/2016: There are no towel bars at the following locations: (a) Room 302 (b) Room 307 (c) Room 401/403 (Exposed brackets) (d) Room 415 (e) Room 417/419 (Exposed brackets) (f) Room 422 (g) Room 424	{C 175}	38 towel bars have been ordered to replaced all defective towel bars. Estimated completion date: 7/21/2016	
{C 185}	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION	{C 185}		

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(C 185)	<p>Continued From page 3</p> <p>(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.</p> <p>(c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.</p> <p>(f) 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 does not have documentation on site of the rehearsals of the fire plan.</p> <p>Findings on 06/10/2016: The quarterly rehearsal fire drills for each shift were not on site for review</p>	(C 185)	<p>We are doing quarterly fire drills for 1st, 2nd, and 3rd shift. Proper documentation will be kept on file.</p>	6/11/2016
(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 has not maintained in a safe and operating condition</p>	(C 189)		

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CHATHAM COMMONS

STREET ADDRESS, CITY, STATE, ZIP CODE
**809 WEST CHATHAM STREET
CARY, NC 27512**

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(C 189)	<p>Continued From page 4</p> <p>because the noted interior doors do not latch and/or drag on the floor 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.</p> <p>Findings on 06/10/2016: The doors at the noted locations do not latch or difficulty in operation: (a) 100 Hall Men's Bathroom (Broken Closure Arm) (b) 100 Hall Women's Bathroom (Door drags on floor) (c) Room 204 (d) 200 Hall Bathroom (e) SCU Men's Bathroom (f) Kitchen Office Bathroom door (g) Resident Phone Room (Repaired during survey) (i) Conference Room</p> <p>2-Based on observations, this facility has not been maintained in a safe manner because of breaches through fire-rated construction invalidated its integrity. This could affect all residents and staff in the event that a fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 06/10/2016: There are smoke detection and life-safety devices located at the following locations with openings in the ceiling that are not sealed with a fire-rated material: (a) All life-safety devices in the Kitchen (b) Boiler Room 100 Hall (c) Refrigerant Line between Rooms 101/103 at ceiling/Hall (d) Employee Lounge/SCU</p>	(C 189)	<p>Broken Closure arm has been replaced.</p> <p>The 100 Hall Women's Bathroom Door will be repaired so door will not drag. Estimated completion: 7/17/2016 Room 204 door has been repaired. SCU Men's Bathroom has been repaired. Kitchen Bathroom door has been repaired.</p> <p>Conference room door has been repaired.</p> <p>a, b, c, and d....all openings have been sealed with UL rated fire caulk.</p>	<p>6/24/2016</p> <p>6/24/2016</p> <p>6/24/2016</p> <p>6/24/2016</p> <p>6/24/2016</p> <p>6/24/2016</p>

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(C 189)	<p>Continued From page 5</p> <p>(e) 100 Hall Men's & Women's Bathroom ceiling sheet-rock joints falling (f) Dining Hall ceiling sheet-rock joints falling over dining tables</p> <p>5-Based on observation, the facility has not maintained the service of the emergency lighting. This could eventually affect all residents and staff in event of an emergency.</p> <p>Findings on 06/10/2016: The wall mounted emergency lighting packs did not illuminate when test at the following locations: (b) Nurse's SCU</p> <p>6-Based on observation, the facility has not maintained a clear passage for egress away from the facility in the event of an emergency. This will affect all residents and staff.</p> <p>Findings on 06/10/2016: There was a steel hospital bed on the sidewalk outside the exit door adjacent to Room 427 blocking the path of egress.</p> <p>7-Based on observation, the facility has not maintained the exit signage.</p> <p>Findings on 06/10/2016: The exit sign does not have a lens attached that indicates EXIT that is located adjacent to Rooms 207/2018.</p> <p>8-Based on observations, the facility fire protection equipment was not maintained in a safe manner. This could effect all residents and staff by not providing full sprinkler coverage upon activation.</p>	(C 189)	<p>(e) and (f)..we will be subcontracting the sheetrock repair work to a Home Improvement Contractor to repair ceilings. Estimated completion: 7/22/2016</p> <p>The wall mounted emergency lighting packs' batteries have been changed out. The light is now operational.</p> <p>The Steel Hospital bed has been moved. The area will not be block.</p> <p>The exit sign has been repaired.</p>	<p>6/24/2016</p> <p>6/24/2016</p> <p>6/24/2016</p>

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{C 189}	<p>Continued From page 6</p> <p>Findings on 06/10/2016: The following locations had dropped and/or missing sprinkler head escutcheons: (a) 100 Hall Women's Bathroom (c) Kitchen (e) Resident Room Bathroom 421/423</p> <p>10-Based on observations, the facility failed to maintain the plumbing fixtures.</p> <p>Findings on 06/10/2016: The hair-washing sink does not have a vacuum breaker located in the Salon.</p>	{C 189}	<p>Escutcheon plates have been ordered for (a), (b), and (c). Estimated completion date: 7/22/2016</p> <p>A vacuum breaker will be installed in the hair-washing sink. Estimated completion: 7/22/2016</p>	

**** Transmit Confirmation Report ****

P.1
Cary Commons

Fax:919-655-1981

Jul 6 2016 08:04pm

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*Chatham Commons
809 West Chatham Street
Cary, NC 27513*

July 6/2016

Frank Strickland
Architectural Engineering Technician
DHSR - Construction Section
2705 Mail Service Center
Raleigh, North Carolina 27699-2705

RE: HA Follow-Up Biennial Construction Survey
FID #920199 Ha1092203
Chatham Commons
809 West Chatham Street
Cary Wake County

Dear Mr. Strickland

Attached is our two (2) POC responses. Reference is made to your report of the Follow-Up Biennial Construction Section Survey dated June 10, 2016 for the facility known as Chatham Commons.

We look forward to your response, and will be pleased to answer any questions you may have.

Respectfully,

Paulette Rogers
Executive Director