

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL055008	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 07/21/2016
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NAME OF PROVIDER OR SUPPLIER
WEXFORD HOUSE

STREET ADDRESS, CITY, STATE, ZIP CODE
**3900 WEXFORD LANE
DENVER, NC 28037**

(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 a Biennial Construction Survey by Ed Miller on July 21, 2016. Records indicate this facility was first licensed on June 10, 1998 as a Home for the aged. The facility is currently licensed for 60 Beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1996 (1998 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were noted which require a Plan of Correction.	C 000	See attached plan of correction	
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. 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 21, 2016: a. Conference Room - the wall paper in spots was coming off.	C 164		See attached plan of correction

SIGN HERE

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

TITLE
Administrator (X6) DATE
09/12/16

Division of Health Service Regulation

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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 failed to prevent chronic unpleasant odors. This would affect all residents, staff and visitors by exposing them to an unpleasant environment. Findings on July 21, 2016: a. Bedroom 105 - the room smelled of urine.</p> <p>2. Based on Observation, the facility failed to maintain the building in an uncluttered, clean and orderly manner, free of all obstructions and hazards This could affect all residents, staff and visitors if in a fire the dampers do not close completely and in a timely manner to contain the fire and smoke within the room of origin. Findings on July 21, 2016: a. Hopper Room - the HVAC return grille and their radiation dampers had an excessive accumulation of dust/lint.</p>	C 166	<p>see attached plan of correction</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</p>	C 189		

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C 189	<p>Continued From page 2</p> <p>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:</p> <p>1. Based on Observation, the Building was not maintained in a safe condition. This could affect residents, staff and visitors by not containing smoke and fire in the room of origin.</p> <p>Findings on July 21, 2016:</p> <p>a. BOM Office - the corridor door had a wedge holding the door open, preventing the rapidly release of the door with a push or pull of the door, to close and latch</p> <p>b. Dietary Office - the HVAC grilles penetrating the fire-resistant-rated ceiling assembly did not have radiation damper, allowing the spread of fire and smoke.</p> <p>c. Bedroom 2145 - the corridor door had a block of wood holding the door open, preventing the rapidly release of the door with a push or pull of the door, to close and latch. Deficiency corrected before Construction Surveyors departed Site.</p> <p>d. Housekeeping - the ¾ hour fire-rated door was missing its closure.</p> <p>e. Sprinkler Riser Room - the gypsum walls near the boiler, were not taped and mudded, a requirement to be a fire-resistance-rated wall assembly, allowing the spread of fire and smoke.</p> <p>2. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff and visitors if smoke/fire is not contained in the Room or compartment of origin.</p> <p>Findings on July 21, 2016:</p> <p>a. Activity Room - the fire sprinkler escutcheon plate was missing, exposing openings through</p>	C 189	<p>See attached plan of correction</p> 	

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C 189	Continued From page 3 the fire-resistance-rated ceiling, allowing the spread of fire and smoke. 3. 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 21, 2016: a. Kitchen -Since the semi-annual maintenance of the commercial kitchen hood's fire extinguishing system in May 2016, there has been no record keeping of the monthly inspections.	C 189	See attached plan of correction 	



Wexford House

A DePaul Senior Living Community
3900 Wexford Lane; Denver, NC 28037
Tel: 704-489-2633
Fax: 704-489-2650
www.depaul.org

FAX TRANSMISSION

To: Ed miller

From: Dedra Shumaker, Administrator

Date: 9/12/16

No. Pages: 7

Fax No.: 919.733.6592

Tel No.: (704) 489-2633

Re: POC. Wexford House

- Urgent
- For Review
- Please Comment
- Please Reply
- Please Recycle

Comments: I have also emailed to you this POC and extension request

Wexford House ... See what sets us apart!

- | | |
|-------------------------------------------------------------------|-------------------------------------------------|
| Quiet rural setting | Homelike atmosphere with welcoming living areas |
| 24-hour access to staff | Nutritious meals and snacks |
| Medication assistance | Assistance with the activities of daily living |
| Housekeeping and laundry services | Hairdresser services available on site |
| Memory Care Unit available | Physician services available on site |
| Transportation services provided to local appointments | |
| Dedicated staff who provide quality care | |
| Full schedule of activities, events, outings and worship services | |

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Plan of Correction for DHSR Construction Section Survey completed July 21, 2016.

Facility: Wexford House
License: HAL-055-008
County: Lincoln

Section .0300 – Physical Plant
10A NCAC 13F .0306 Housekeeping and Furnishings (a)(1),(2), (3) (e)
Tag# C 164

- 1.) The wallpaper that was coming off has been repaired as of August 31, 2016

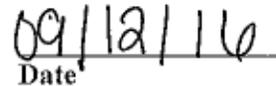
Section .0300 – Physical Plant
10A NCAC 13F .0306 Housekeeping and Furnishings (a)(5) (e)
Tag# C 166

- 1.) The odor in bedroom 105 has been eliminated. Housekeeping staff performed a deep clean on this room on July 22, 2016
- 2.) The HVAC return grille and their radiation dampers in the hopper room have been cleaned as of August 26, 2016.

Section .0300 – Physical Plant
10A NCAC 13F .0311 Other Requirements (a) (k)
Tag# C 189

- 1.) (a) The BOM door has been equipped with a magnetic door catch to allow for rapid release of the door as of August 20, 2016.
(b) The HVAC grilles in the dietary office are scheduled to be repaired on or before September 30, 2016.
(c) The block that was holding the door to bedroom 214 was removed on July 21, 2016 and family has been educated not to replace the block.
(d) The housekeeping door was equipped with an auto door closure on August 20, 2016.
(e) The gypsum walls in the sprinkler room have been repaired with tape and mud on August 26, 2016
- 2.) The fire sprinkler escutcheon plate in the activity room was replaced on August 29, 2016.
- 3.) The kitchen hood's fire extinguishing system has been inspected by facility monthly effective July 22, 2016.


Dedra Shumaker, Administrator


Date

RE Plan of Correction for Construction Survey of July 21, 2016

Facility: Wexford House

License number: HAL-055-008

County: Lincoln

September 12, 2016

Dear Mr. Miller

We respectfully request an extension for the item listed below which will be completed by Lawing Heating and Air:

The HVAC grilles in the dietary office will be repaired with a radiation damper (documented on SOD as Tag C 189 1 b) on or before September 30, 2016.

If you have any questions or requests regarding this request for an extension, please do not hesitate to call.

Respectfully,

A handwritten signature in black ink that reads "Dedra Shumaker". The signature is written in a cursive style with a large, looped initial "D".

Dedra Shumaker
Administrator