

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL077011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 06/08/2016
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HERMITAGE RET CNT OF ROCKINGHAM

**139 MALLARD LANE
ROCKINGHAM, NC 28379**

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C 000	Initial Comments Report of a Biennial Survey by Billy S. Bryant conducted on 06/08/2016. Records indicate this facility was first licensed on 05/27/1988. The facility is currently licensed for 114 Beds with a 54 Beds Special Care Unit. 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 1978 (revision 8) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1987 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	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:	C 101		



Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

6489

R51X21

If continuation sheet 1 of 8

[Handwritten Signature]

Administrator

7/20/16

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C 101	Continued From page 1 1. Based on observation the facility does not meet building code requirements in effect at the time for a special care unit with a special locking system. Findings on 06/08/2016: a. Moore & Richmond Community (S.C.U.) - There is not a manual override for the special locking system at the interior entrance to the special care unit. b. Moore & Richmond Community (S.C.U.) - Moore Hall S.C.U. - There was an additional manual latching lock on the exterior side of the fence gate that is already equipped with a special locking system. Note - Corrected by removing the additional manual locking latch while surveyor was on site. c. There is not a schematic diagram of the special locking system posted at the fire alarm panel.	C 101	a. Adding override to entrance to unit b. Removed lock c. Redone schematic diagram of sca locking system.	7/28/16 6/8/16 7/01/16
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 there is a pattern of walls, ceilings, floors and floor coverings not maintained clean and in good repair.	C 164	Rule area will be continue monitor system in place no longer a problem since last survey cause there was no a problem then. maintenance monitor weekly to assure maintain.	

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C 164	Continued From page 2 Findings on 06/08/2016: a. Anson, Richmond, Scotland and Moore Communities - The corridor walls, resident room doors and door frames, public area doors and door frames need touch up repair and painting, some specific examples are: Scotland Community, Room #19 - There is a hole in the wall behind the room 's door to the corridor. Scotland Community, The Cardinal Room - The ceiling is damaged at the HVAC register. Scotland Community, Women's Visitor Restroom - The wall is damaged around the sink. b. The facility's carpet is worn beyond repair and badly stained in many locations. c. VCT tile floors in the facility are dirty and have wax buildup at the edges and the wax has completely worn off on the high traffic areas of the floors.	C 164	a. All areas have been painted, holes repaired, Carpet has been shampoo. Monitor System in place for maintenance so we can identify areas each week that need repairs. Administrator will check this weekly also. (Carpet is to be replaced await approved). 7/20/16	
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:	C 166		

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C 166	Continued From page 3 1. Based on observation the facility is not maintained free from hazards. Findings on 06/08/2016: a. Scotland Community, Room #33 - The Toilet seat is broken and has enough movement to slip off the edge of the toilet. b. The water closet seal is broken and water is leaking from the bottom of the fixture contributing to a slippery floor and unclean condition. c. Scotland Community, Room #29 - The support legs for the sink have been removed and are lying on the floor in the bathroom. d. Anson Community, Room 10 - There is a hasp and keyed pad lock on the resident's closet door.	C 166	a. Toilet seat replaced 6/14/16 b. water closet seal repair 7/01/16 c. Support legs back in place 6/08/16 d. Key pad removed 7/01/16	
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 did not provide an individual towel bar in each bedroom or adjoining bathroom. Finding on 06/08/2016: a. The towel racks in resident rooms have been	C 175	*monitor area weekly maintenance responsibility to do Administrator to check weekly with walk throughs! a. Towel racks have been replaced 7/10/16	

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C 175	Continued From page 4 removed removed to allow installation of paper towel dispensers so there is only one towel rack in double occupancy rooms.	C 175	<i>monitor weekly Administrator & maintenance</i>	
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 there is a failure to maintain the facility's fire safety systems in a safe manner. Penetrations or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Findings on 06/08/2016: a. Exterior Water Heater Room - Gaps around duct and piping penetrating the ceiling are sealed with an expandable foam type sealant that is not fire resistant rated. b. Exterior Electrical Room -Gaps around conduits penetrating the ceiling are sealed with an expandable foam type sealant that is not fire resistant rated. c. Exterior HVAC Room - Gaps around duct and piping penetrating the ceiling are sealed with an	C 189		
			<i>a. Gaps around water heater done</i>	<i>6/14/16</i>
			<i>b. Conduits penetrating done.</i>	<i>6/14/16</i>
			<i>c. Gaps around ducts done</i>	<i>6/14/16</i>

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C 189	Continued From page 5 expandable foam type sealant that is not fire resistant rated. d. Scotland Community, Nurses' Station - There is a gap in the ceiling where the emergency light is mounted. e. Anson Community, Carolina Commons Room - There is a gap in the ceiling where the emergency light is mounted. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the facility could be effected if doors are not smoke resistant or do not latch and close as required so as to limit the spread of smoke or fire to the area of origin. Findings 06/08/2016: a. The facility's cross corridor doors are not smoke resistant due to the large gap between the doors where the meet when closed. b. Basement Laundry - The laundry chute door hits the frame and will not close. 2. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. A doors were held open by unapproved device. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin. Finding on 06/08/2016: a. Richmond Community, TV Room - The door to the corridor has a kick down type door stop. 3. Based on observation the facility plumbing	C 189	d. emergency light done 6/14/16 e. emergency light done 6/14/16 2.a. strip on doors 6/14/16 b. chute door repair 6/14/16 2.a. door stop removed 6/9/16	

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C 189	Continued From page 6 equipment is not maintained in a safe condition. Failure to maintain or install plumbing safety devices or equipment could effect all occupants of the facility if the absence of the plumbing or safety devices caused the domestic water supply to become contaminated. Finding on 06/08/2016: a. Scotland Community, Salon - The hand held rinse wand for the salon sink does not have a vacuum breaker/anti-siphon device installed.	C 189	3.a. hand held rinse wand replaced Maintenance will monitor areas weekly to assure areas are kept up. Administrator will check areas weekly also with walk thru's.	7/20/16
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: Based on observation the facility failed provide the required exhaust ventilation equipment in a space required to be mechanically exhausted. Finding on 06/08/2016: a. Basement Laundry - Three exhaust fan is.	C 199	* @exhaust fan are ^{to be} replaced. maintenance will monitor areas weekly to make sure are works properly. Administrator walk thru weekly to check.	7/26/16

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C 199	Continued From page 7 damaged.	C 199			