

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL017004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/19/2018
NAME OF PROVIDER OR SUPPLIER JEFFERSON CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 111 STALEY BOSWELL ROAD YANCEYVILLE, NC 27379		
(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 Construction Section Biennial Survey conducted by Suzanna Fay on July 19, 2018. This facility was licensed on December 1, 1985 as a Home for the Aged, serving twelve residents. Therefore, this facility must meet the 1984 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes and the 1978 North Carolina State Building Code with 1984 revision section 409.1(c) Institutional (I) Occupancy- Unrestrained. Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 110	Construction-Meet Sanitary Requirements SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION (e) The sanitation, water supply, sewage disposal and dietary facilities shall comply with the rules of the North Carolina Division of Environmental Health, which are incorporated by reference, including all subsequent amendments. The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", 15A NCAC 18A .1300 are available for inspection at the Department of Environment and Natural Resources, Division of Environmental Health, 2728 Capital Boulevard, Raleigh, North Carolina. Copies may be obtained from Environmental Health Services Section, 1632 Mail Service Center, Raleigh, North Carolina 27699-1632 at no cost.	C 110		

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

TITLE

(X6) DATE

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C 110	Continued From page 1 This Rule is not met as evidenced by: Based on observation, the facility was not in compliance with the "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", specifically 15A NCAC 18A .1317(a) which require the facility to take effective measures to keep vermin out and prevent their presence on the premises. Findings on July 19, 2018: a. Room 4 - there was evidence of bedbugs in the room along the corridor wall. The walls had fecal stains along the ceiling line, in the corner and around penetrations such as nails and cover plates. Bugs were observed in the stains. Dead insects and debris was found behind the beds and under the beds. Interview with staff and documentation review revealed that the facility had been treated once for bedbugs on May 30, 2018 and a follow up inspection was scheduled for August. b. Room 3 - evidence of bedbugs was seen on the corridor wall and ceiling. Little piles of dead insects and debris were observed in the corners of the room.	C 110		
C 111	Must Have Current San. & Fire Safety Reports 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. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have a current sanitation inspection report	C 111		

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C 111	Continued From page 2 maintained in the home and available for review. Findings on July 19, 2018: a. A current sanitation inspection report was not available.	C 111		
C 143	Janitor's Closets-Locked SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (B) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be monitored while in use; This Rule is not met as evidenced by: 1. Observations revealed that the cleaning agents and bleach were not secured in a locked area. Findings on July 19, 2018: a. At the time of survey, the janitor's closet which contained bleach and other cleaning agents was unlocked.	C 143		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;	C 160		

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C 160	Continued From page 3 This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained clean and safe. Findings on July 19, 2018: a. The exterior side of the exit near the staff area was partially blocked with furniture. b. The air conditioning units along the back of the facility were covered in spider webs and grass clippings. c. Day room exit - the exterior face of the day room exit door is delaminating along the bottom of the door.	C 160		
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. Observations revealed that the floors were not kept clean and in good repair. Findings on July 19, 2018: a. Office - the threshold was damaged. b. Closet off of laundry - there were piles of clothing, bedding and food containers on the floor of the closet. c. Several bedroom closets had clothes piled directly on the floor.	C 164		

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C 164	Continued From page 4 d. The bedroom floors had dirt and dead insects under the beds, along the baseboards and in the corners. e. Day Room - the wall base beside the door was torn and had been secured with clear tape. 2. Observations revealed that the facility was not kept clean and free of pests. Findings on July 19, 2018: a. Room 4 - there was evidence of bedbugs in the room along the corridor wall. The walls had fecal stains along the ceiling line, in the corner and around penetrations such as nails and cover plates. Bugs were observed in the stains. Dead insects and debris was found behind the beds and under the beds. Interview with staff and documentation review revealed that the facility had been treated once for bedbugs on May 30, 2018 and a follow up inspection was scheduled for August. b. Room 3 - evidence of bedbugs was seen on the corridor wall and ceiling. Little piles of dead insects and debris were observed in the corners of the room. 3. Observations revealed that the furnishings were not maintained in good repair. Findings on July 19, 2018: a. Room 2 - the door drags on the frame making it difficult to open and close. b. Room 1 - the chest of drawers has one drawer front broken off leaving exposed nails. 4. Observations revealed that the ceilings were not kept clean and in good repair. Findings on July 19, 2018: a. Resident Bath 1 - the ceiling around the	C 164		

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C 164	Continued From page 5 exhaust fan is dirty and the finish is flaking off. 5. Observations revealed that the walls were not kept clean and in good repair. Findings on July 19, 2018: a. Day Room - the walls of the room were heavily scuffed. b. Resident Bath 2 - the shower walls have black mildew stains in the grout and the tiles have yellow scum stains along the surface. c. Resident Bath 2 - the wall at the light switch has brown stains around the cover plate.	C 164		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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. (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. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Review of records revealed that fire rehearsals were not conducted, recorded or available for review. Findings on July 19, 2018: a. Review of records revealed no fire drills	C 185		

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C 185	Continued From page 6 conducted since October of 2017.	C 185		
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 the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not activate during a fire or other emergency. Findings on July 19, 2018: a. Upon arrival at the facility, the alarm was in silence mode. Further investigation revealed trouble on one or more of the heads. The alarm failed to sound when sprayed with canned smoke. Staff were instructed to activate a fire watch and the local fire inspector was notified. 2. Based on observation, the mechanical equipment was not maintained in operating condition. Findings on July 19, 2018: a. The exterior dryer cap had dry rotted and was heavily damaged.	C 189		

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C 189	Continued From page 7 b. Kitchen - the grease filter is missing in the kitchen exhaust. The exhaust fan is coated in grease. 3. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on July 19, 2018: a. Women's half bath - the toilet seat was detached from the toilet. 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops or within the door. Findings on July 19, 2018: a. Resident rest room - there is a gap around the door knob. 5. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on July 19, 2018: a. Room 4 - the electrical outlet behind the bed near the window was not secure in the wall. 6. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection. Findings on July 19, 2018:	C 189		

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C 189	Continued From page 8 a. Observations revealed that the fire extinguishers were not checked in house on a monthly basis. 7. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on July 19, 2018: a. Dining Room - the emergency light does not work.	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. Observations revealed that the facility did not provide exhaust ventilation in the required areas. Findings on July 19, 2018:	C 199		

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C 199	Continued From page 9 a. Resident Bath 1 - the exhaust fan was not working. b. Resident baths - both bathrooms had a heavy accumulation of dust on the grilles.	C 199		
C 200	Facilities for 7-12 Res.-Call System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (h) In facilities licensed for 7-12 residents, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed. (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. Observations revealed that the facility did not provide a working call system. Findings on July 19, 2018: a. At the time of survey, a call system was in place and it did not work. Because the live in staff living room was being used for storage at the time of survey, it was unclear if staff was live in or if the facility used 24 hour awake staff.	C 200		