HERITAGE MEADOWS

LONG TERM CARE FACILITY

November 19, 2018

Mr. Ed Miller, Engineering Surveyor
Construction Section
North Carolina Department of Health and Human Services
2705 Mail Service Center
Raleigh, North Carolina 27699-2705

RE: Heritage Meadows, Oxford, Granville County, North Carolina
ID Number HAL039015

Dear Mr. Miller,

Please find the corrective plan to the October 25, 2018 report of deficiencies. As noted in the report, most of the items were addressed immediately. I believe we have satisfied the requirements set forth and should have the suspension for new admissions lifted. As we increase census, we will be able to complete the renovations on the West Wing and continually improve the East Wing as well.

If you have any questions or need additional information, please feel free to give me a call.

Thank you for your assistance,

J. Michael Dyson
704 650-4635

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL039015	A. BUILDING: 01 B. WING _____	R 10/25/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HERITAGE MEADOWS LONG TERM CARE	6659 PRIVATE SCHOOL ROAD OXFORD, NC 27565

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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Ed Miller, conducted on 10/25/2018: Deficiencies were cited that will require a new Plan of Correction.	{C 000}		
{C 132}	Bathrooms-Must Provide Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains; This Rule is not met as evidenced by: 1-Based on observation, the bathrooms and toilet rooms are not provided for privacy. Findings on 10/25/2018: The spas in the West Wings do not have privacy curtains in place. Interview with provider revealed plans to complete the East Wing remodel and repair before starting the bulk of West Wing work. Their plan is to close the cross corridor doors near bedroom 11 during the West Wing Work.	{C 132}	Corrective Action: C 132 The reviewer was correct in stating that we plan to utilize the East Wing during intial rent up and then proceed with the remodel and repair to the West Wing. The West Wing will be sealed off until repair items are completed. Privacy curtians will be added at that time Responsable party: Owner and Maintenance Department	January, 2018
{C 149}	Corridors-Night Lights	{C 149}		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: J. Michael Dyson | TITLE: Owner | (X6) DATE: 11/21/2018

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{C 149}	Continued From page 1 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (3) Corridors shall be lighted with night lights providing 1 foot-candle power at the floor; and This Rule is not met as evidenced by: 1-Based on observation, this facility does not provided corridor night lighting. Findings on 10/25/2018: Based on interview of maintenance personal, corridor night lighting fixtures have been identified, but the viability of repairing then or replacing them has not been determined.	{C 149}	Corrective Action: C-149 Corridor lights are located in the corridor vents. Once cleaned and outfitted with LED bulbs, they will meet the required illumination of 1 foot-candle power at the floor. Responsible Party: Owner, Maintenance Dept.	November 29, 2018
{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, this facility has failed to be maintained in good repair. Findings on10/25/2018: The exterior exit door store front has been severly damaged due to a break-in that is located adjacent to the rear Kitchen and the facility is not	{C 164}		

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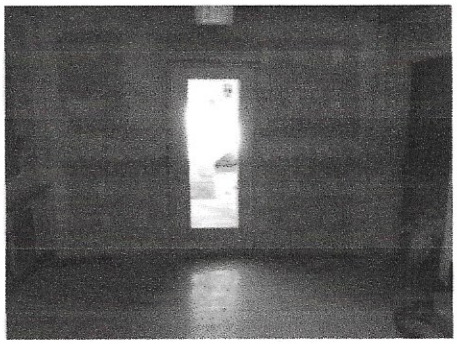
{C 164}	Continued From page 2 secure. Based on interview of maintenance personal the door is due to arrive in two weeks. 2-Based on observation, this facility has failed to provide furnishings clean and in good repair for each resident bedroom. Findings on 10/25/2018: All of the resident room closets have floors that are stained, dirty and finishes that do not match adjacent room floor finishes/cleanesss. 3-Based on observation, this facility has failed to maintain the interior doors in good repair. Findings on 10/25/2018: The following locations have interior doors that do not latch, drag on the floor and have missing latch hardware: (a) Closet doors in Rooms 11 to 20 [West Wing] Interview with provider revealed plans to complete the East Wing remodel and repair before starting the bulk of West Wing work. Their plan is to close the cross corridor doors near bedroom 11 during the West Wing Work.	{C 164}	Corrective Action: C-164 The door has been replaced. 	November 10, 2018
{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.	{C 166}		

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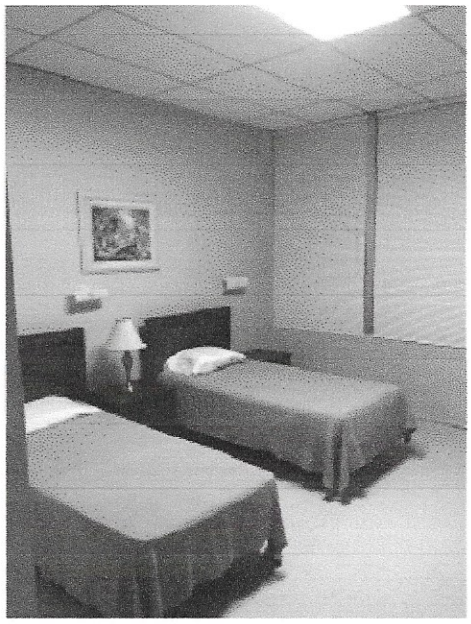
{C 166}	Continued From page 3 This Rule is not met as evidenced by: 2-Based on observation, this facility has failed to be maintained in a clean and orderly manner. Findings on 10/25/2018: Most of the rubber gasket material for the exterior resident room windows is either missing or partially installed that would allow water migration into the rooms from the exterior. Based on interview of maintenance personal this work will be completed when the blinds are installed. 4-Based on observation, this facility has failed to be maintained free of hazards. Findings on 10/25/2018: The through-wall ac units for the Kitchen, have voids in the exterior wall construction due to installation and no measures were taken to prevent water from migrating into the exterior wall construction and eventually into the Kitchen interior walls.	{C 166}	Corrective Actions: C-166 The rubber gaskets are being replaced as we add the blinds to each room. Responsible Party: Owner and Maintenance Dept. 	December 2, 2018
{C 170}	Housekeeping-Curtains, Blinds, Res. Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (9) have curtains, draperies or blinds at windows in resident use areas to provide for resident privacy; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, this facility has not	{C 170}	Corrective Actions: C-170 the blinds are being added to each room as they come in. Responsible Party: Owner and Maintenance Dept.	December 2, 2018

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{C 170}	Continued From page 4 provided window treatments in the resident rooms for privacy. Findings on10/25/2018: All of the resident bedrooms do not have window treatments for privacy. Some blinds have begun arriving but none have been installed.	{C 170}		
{C 174}	Bedroom Furnishings-Table, Mirror, Chairs 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: (2) a bedside type table; (3) chest of drawers or bureau when not provided as built-ins, or a double chest of drawers or double dresser for two residents; (4) a wall or dresser mirror that can be used by each resident; (5) a minimum of one comfortable chair (rocker or straight, arm or without arms, as preferred by resident), high enough from floor for easy rising; (6) additional chairs available, as needed, for use by visitors; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1-Based on observation, this facility has failed to provide furnishings clean and in good repair for each resident bedroom. Findings on 10/25/2018: The following resident bedrooms have chests of drawers furniture that are in disrepair, missing hardware and unsuitable finishes:	{C 174}	Corrective Action - C 174 The furniture was cleaned and repaired in all East Wing rooms Responsible Party: Owner and Housekeeping Staff	November 3, 2018

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{C 174}	Continued From page 5 (b) Rooms 11 to 20 (West Wing) Interview with provider revealed plans to complete the East Wing remodel and repair before starting the bulk of West Wing work. Their plan is to close the cross corridor doors near bedroom 11 during the West Wing Work. 2-Based on observation, this facility has failed to provide furnishings clean and in good repair for each resident bedroom. Findings on10/25/2018: Most of the resident bedrooms do not have a minimum of one comfortable chair.	{C 174}	Corrective Action - C 174 All East Wing rooms have the required number of comfortable chairs. Responsible Party: Owner and Housekeeping Staff	November 3, 2018
{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, this facility has failed to provide in good repair towel bars for each resident bedroom and bathrooms. Findings on 10/25/2018: The following resident bedrooms do not have the required towel bars in place and/or in good repair: (b) Rooms 11 to 20 (West Wing) Interview with provider revealed plans to	{C 175}	Corrective Action - C 175 All East Wing rooms have the towel bars in each closet. Responsible Party: Owner and Housekeeping Staff	November 3, 2018

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{C 175}	Continued From page 6 complete the East Wing remodel and repair before starting the bulk of West Wing work. Their plan is to close the cross corridor doors near bedroom 11 during the West Wing Work.	{C 175}		
{C 179}	Fire Alarm System-Shall Transmit Automatic SECTION .0300 - PHYSICAL PLANT 10a NCAC 13F .0307 FIRE ALARM SYSTEM (a) The fire alarm system in adult care homes shall be able to transmit the fire alarm signal automatically to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. This Rule is not met as evidenced by: Based on observation and interview, the fire alarm system does not tranmit any signal. Findings on 10/25/2018 Observation of the fire alarm panel revealed the panel has a communication board but there are no phone lines connected to the panel. Interview with facility staff revealed they would have to manually call 911 for fire trucks to respond. Based on interview of Administrator phone lines are being sorted out with the building owner.	{C 179}	Corrective Action - C 179 The fire alarm has a dedicated line allowing it to be directly connected to the call station. In preparing the lines for instillation we were unable to keep the existing phone numbers. The new numbers are as follows: Business Telephone Numbers (tech will confirm on-site) o Main- 919-690-1299 o Fax- 919-690-1297 o Rollover- 919-690-1294 o Hallway- 919-690-1296 o Emergency line- 919-690-1292 Responsible Party: Owner and Fire Alarm Company	November 26, 2018
{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	{C 189}		

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{C 189}	Continued From page 7 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, this facility has failed to maintain the fire resistance components in a safe condition. Findings on 10/25/2018: The following locations have failures/damage to the one-hour protected lay-in ceiling construction: Assure that lights penetrating the ceiling are properly protected. (a) East Wing Exit door ceiling bulk-head (c) East Wing corridor lay-in ceiling/light fixture connections (g) Central Hall 2-Based on observation, this facility has failed to maintain the fire safety components in a safe condition. Findings on10/25/2018: The cross-corridor fire doors failed to close when the fire alarm test was conducted. 3-Based on observation, this facility has failed to maintain the fire safety components in a safe condition. Findings on 10/25/2018: There is a 2"" hole in the corridor wall construction above the emergency corridor light unit between Rooms 14 & 15. 4-Based on observation, this facility has failed to	{C 189}	Corrective Action - C - 189 The following items have been repaired: All ceiling tile replaced in the East Wing including the bulk heads. All light fixtures have been replaced in the East Wing. The fire door has been repaired and closes correctly The hole between rooms 14 and 15 has been repaired The hardware on exit door adjacent to room 20 is repaired. The electrical pipes located in the exit hallway have been covered to the and properly fire protected. The mixing valve in the shower identified during inspection is repaired Responsible Party: Owner and Maintenance Department	November 9, 2018

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{C 189}	Continued From page 8 maintain the fire safety components in a safe condition. Findings on 10/25/2018: The panic door hardware is in disrepair at the West Wing exit adjacent to Room 20. 5-Based on observation, this facility has failed to maintain the fire resistance components in a safe condition. Findings on 10/25/2018: The one-hour fire rated lay-in ceiling construction is not designed/tested to used as a chase for an electrical panel that is located in the exit access corridor. As installed it could not be determined if the pipes were protected at the ceiling penetrations. 6-Based on observation, this facility has failed to maintain the plumbing components in a safe and operating condition. Findings on 10/25/2018: The water-mixing shower control valve is broken that is located in then East Wing Spa.	{C 189}		