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
	HAL025032	A. BUILDING: 01 B. WING _____	12/06/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOMEPLACE OF NEW BERN	1309 MCCARTHY BLVD NEW BERN, NC 28562

(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 Construction Section Biennial Survey by Dennis Harrell on 12-6-2018.	C 000		
	Records indicate this facility was first licensed as a Home for the Aged serving 60 residents, 20 of which reside in the SCU, on 6-19-1997. Therefore the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 (1997 Revision) North Carolina State Building Code(s) for Institutional Occupancy.			
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: Based on observation and interview, most staff in the Special Care Unit were not aware of the location, use or existence of the required central emergency release switch for the Special	C 101		

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C 101	Continued From page 1 (magnetic) Locking on all the exit doors. All staff responsible for evacuation in an emergency must be properly trained in evacuation procedures and equipment.	C 101	C 101-Central Emergency Release i.e. Maglock Release Training is completed during orientation and an in-service has been completed to retrain the staff on evacuation procedures and equipment. The Maintenance Director will perform a emergency preparedness drill on a quarterly basis for the staff.	12/28/18
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: Based on observation, the corridor was not maintained free of obstructions. At least 6 feet of clear width must be maintained in exit corridors. Findings on 12-6-2018: a. There were wheelchairs and carts stored in the corridor at the Special Care nursing station reducing the clear width to about 1.5 feet. Note; This deficiency was corrected during the survey. b. There were several kitchen carts stored in the corridor reducing the clear width to about 4.25 feet.	C 150	C150- a. Deficiency was corrected during the survey. Staff has been retrained on clear passage ways and will continue to monitor to ensure wheelchairs and carts are stored correctly. All management will monitor on a daily basis to ensure corridors are free of equipment and obstruction. b. Kitchen carts will be left in the dining area until the dietary team removes them at the scheduled time. The staff has been notified of this change and has been instructed to ensure that the corridors are to be free of equipment and other obstruction. All management will monitor to ensure corridors are free of equipment and obstruction on a daily basis.	12/28/18
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 2 This Rule is not met as evidenced by: Based on observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on 12-6-2018: a. Several (3) portable medical oxygen cylinders were stored in no container or rack in room 109. b. One portable medical oxygen cylinder was stored free standing on a table in room 119.	C 166	C 166- Extra tanks have been removed in both room 109 and room 119 and current tanks are properly stored in containers and/ or racks. The nursing team will monitor oxygen tanks to ensure they are stored properly.	12/28/18
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 corridor smoke detector near the Country Kitchen failed to activate when tested with smoke. Smoke detectors that do not work properly endanger all residents and staff. 2. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch	C 189	C189 #1- The smoke detector by the Country Kitchen has been replaced and tested by the Maintenance Director and is functioning correctly. The Maintenance Director will test the smoke detectors on a monthly basis to ensure they are working properly.	12/11/18

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C 189	Continued From page 3 present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings on 12-6-2018; a. The door to the physical therapy room was wedged open. b. There was a hole at the latchset through the door to the Special Care Med room. c. The door to room 302 does not fit the opening properly to be resistant to the passage of smoke. d. The door to room 303 does not fit the opening properly to be resistant to the passage of smoke. e. The door to room 304 does not fit the opening properly to be resistant to the passage of smoke. f. The door to the Special Care Dining room was blocked open with an ice cart. g. The door to the parlor will not latch when closed. 3. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised in locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Finding on 12-6-2018: The ceiling was damaged in multiple locations in the AL Dining room.	C 189	C189 #2 a. A magnetic door release has been ordered for the physical therapy room. The wedge has been removed. The Maintenance Director will monitor all doors to ensure that doors are not wedged open.	12/28/18
			C189 #2 b. The hole at the latchset has been repaired with caulking as it is not a fire rated door. The Maintenance Director will monitor all doors.	12/17/18
			C189 #2 c. d. and e. A door jamb weatherstrip kit for smoke stop was installed on the room doors for 302, 303, and 304. The Maintenance Director will monitor all room doors on a monthly basis to ensure they fit properly to be resistant to the passage of smoke.	12/21/18
			C189 #2 f. The ice cart will be kept inside the dining area 6ft away from the door. Staff are aware of this rule and were instructed to ensure that the doors are to be free of equipment and other obstruction. All management will monitor to ensure doors are free of equipment and obstruction on a daily basis.	12/06/18
			C189 #2 g. The Maintenance Director replaced the parlor door latch, added a weatherstrip kit for smoke stop. Parlor door latches properly. The Maintenance Director will monitor all doors on a monthly basis to ensure they latch properly.	12/24/18
			C189 #3 Our Regional Area Engineer was notified on 12/06/18 and a quote was entered on 12/21/18 to repair and replace the sheetrock around the AC supply vents, and to repair the crack in the ceiling that runs the length of the room. Repairs will start for 01/02/19.	

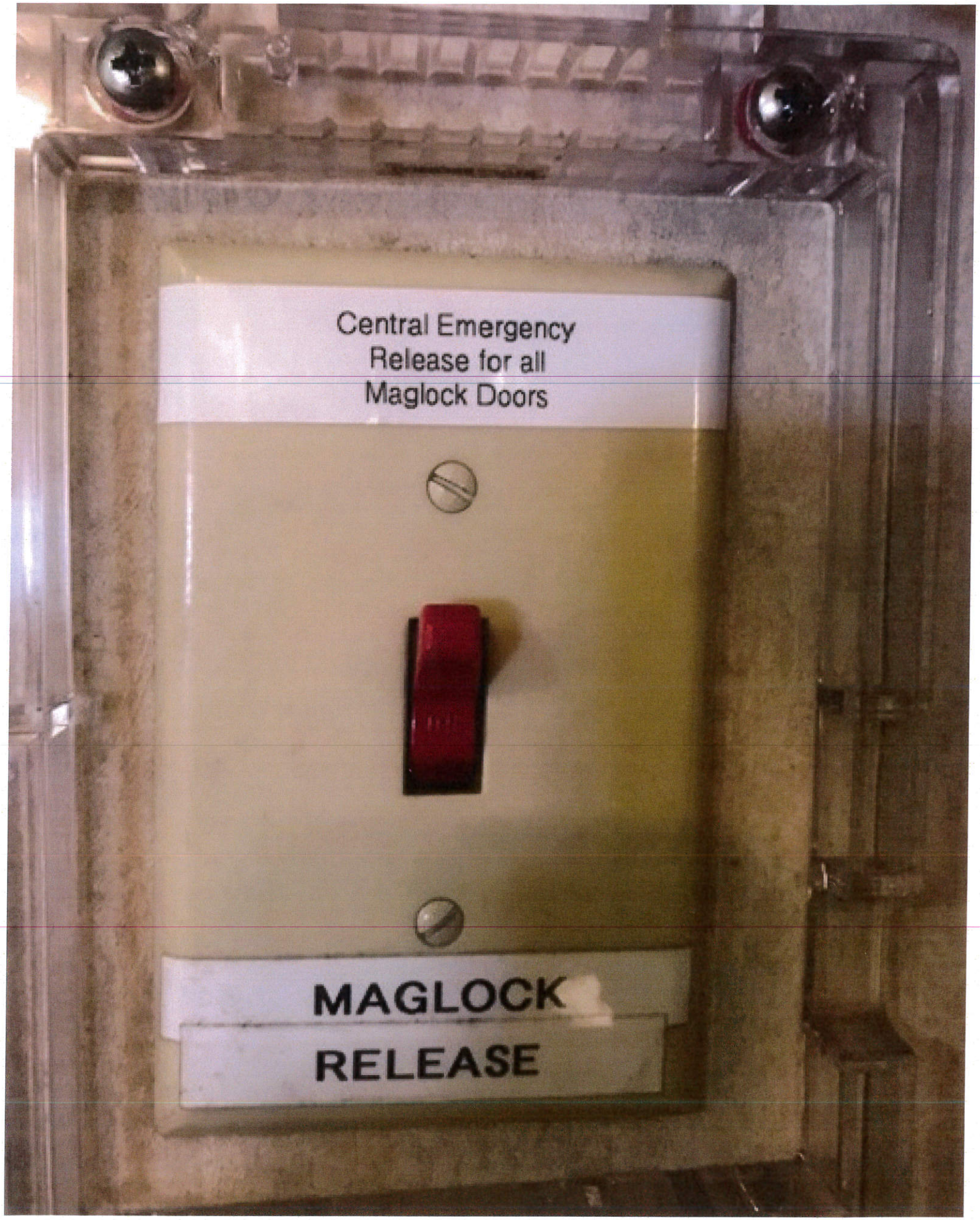

301


302


303


304


PARLOR


Central Emergency
Release for all
Maglock Doors
MAGLOCK
RELEASE

FIVESTAR QUALITY CARE, INC.

Attendance Form

Training Topic/Name: Clear Corridors - Free of Equipment & Obstruction / Hallways

Facility/Community: Homeplace of New Bern **Date:** 12/28/18

Name	Title
Kelly Brown	Activities
[illegible]	Activities
Ann Jackson	Activities/reception
Elizabeth Mariella	MT
Charles D Bloo[illegible]	Cook
Sylvia Burdar	Med Tech/CNA
Carei Zuller	ED
Anie Rodriguez	CNA
Khrystal Braswell	CNA
William Hof	FSD
Ronald E. Trend	D.A.
[illegible]	DRC
Catherine Jaqueneu	Sales
[illegible]	Wellness Coord
Gail W. Thu	Resp.
Judith Bowden	Housekeeper
Imelda Raymundo	CNA
Ramona Dunn	Housekeeper
[illegible]	Maintenance

FIVESTAR QUALITY CARE, INC.

Attendance Form

Training Topic/Name: Central Emergency Release-BTK

Facility/Community: Homeplace of New Bern **Date:** 12/28/18

Name	Title
Lillian Early	PCA
Deborah Bradley	CNA
Patsy COX	Med
Amanda Doman	BOM
Kelly Brown	Activities
Anna Jackson	Receptionist/Activites
[illegible]	Activites
Elizabeth Mariella	MT
Sylvia Bunch	Med. Tech/CNA
Carla Cullen	ED
Anice Rodriguez	CNA
Khrystal Braswell	CNA
[illegible]	FSD
[illegible]	[illegible]
[illegible]	DRC
Catherine Jaynes	Sales
[illegible]	Wellness Coord
Gail B. Thomas	Resp.
Judith Bowden	Housekeeper
[illegible]	CNA
Lisa Rogers	Housekeeper
Ramona Dunn	Housekeeping
[illegible]	Maintenance

The Silverado Group, Inc.

P.O. Box 784
Locust, NC 28097

Estimate

Date	Estimate #
12/20/2018	420

Name / Address
Homeplace of New Bern 1309 McCarthy Blvd New Bern, NC 28562

Quote terms	30 days
Estimator	Matt Salyer

Item	Description	Qty	Rate	Total
	AL DINING ROOM CEILING			
19 Ceilings & Cover	Repair/Replace sheetrock around AC supply vents	8.00	480.00	3,840.00
19 Ceilings & Cover	Repair crack in ceiling that runs length of room If its a sheetrock rock we will repair If its an expansion joint we will clean up so it operates as intended	1.00	1,020.00	1,020.00
19 Ceilings & Cover	Skim coat entire ceiling for a slick ceiling finish after repairs are complete	1,200.00	1.80	2,160.00
19 Ceilings & Cover	Supply materials and labor to paint entire ceiling	1,200.00	1.50	1,800.00
			Total	$8,820.00

Phone #	Fax #	E-mail
704-320-3091	704-888-0054	matt@silveradogroupinc.com

Magnetic door release ordered-approved

View Purchase Order

Purchase Order PO-00255637
Status Issued

Summary

Company LE001 FSQ, Inc
Purchase Order Type
Supplier GRAINGER INDUSTRIAL SUPPLY
Currency USD
Document Date 12/28/2018
Line Total Amount 65.63

Terms and Taxes

Payment Terms Net 30
Due Date
Default Payment Type Check
Override Payment Type
Credit Card
Supplier Contract SC-00000016: Grainger Punchout
Tax Option Enter Tax Due to Supplier

Contact Information

Issue Option XML Auto
Buyer Nicholas Genatossio
Bill-To Contact Nicholas Genatossio
Bill-To Contact Detail Nicholas Genatossio
Bill-To Address
Ship-To Contact Thomas Tenney
Ship-To Contact Detail Thomas Tenney
Ship-To Address 1309 McCarthy Boulevard
New Bern, NC 28562
United States of America
Memo
Internal Memo

Goods Lines

Goods Order Line	Line	Item and Category	Supplier Item Identifier	Tax	Tax Recoverability	Quantity	Cost	Delivery	Retention	Prepaid	Ship-To Address	Ship-To Contact	Deliver-To	Item Identifiers	Memo	Location	Business Document Lines	*Cost Center	*Department	Project	*Additional Worktags	Splits
PO-00255637 - Line 1	1	**Item** TK24637159T **Item Description** Automatic Door	3EHF5	**Tax Applicability** Taxable		**Ordered** 1 **Received** 0 **Invoiced** 1	**Unit of Measure** Each **Unit Cost** 65.63	**Due Date** _____			1309 McCarthy Boulevard New Bern, NC 28562 United States of America	Thomas Tenney	Home Place of New Bern	UNSPSC : 31162804	MAGNETIC DOOR HOLDER - GRAINGER	Home Place of New Bern	RQ-00252865 Supplier Invoice: SI-00572495 - 65.63	46041 Home Place of New	210 Environmental Services		Debt Type: Unencumbered Line of Business: AL	

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		Holder Stop Satin Bronze Finish Material Cast Brass Color Silver Holder Base Height 2-34 In. Holder Base Width 2-12 In. Holder Projection 2-18 In. Strike Base Height 4 In. Strike Base Width 2 In. Strike Projection 1-14 In. Base		Tax Code			Extended Amount 65.63								- THOMAS TENNEY			Born				
		Spend Category Interior R&M Other																				

Process History

Process	Step	Status	Completed On	Due Date	Person	Comment
Purchase Order Event	Purchase Order Event	Step Completed	12/28/2018 07:42:10 PM	01/04/2019	Carlie Quillen	
Purchase Order Event	Check Budget	Not Required		01/04/2019		
Purchase Order Event	Approval by Touchtown Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by Project Spend Approver 1	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center Facilities 1	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center Facilities 2	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center Facilities 3	Not Required		01/04/2019		
Purchase Order Event	Approval by Project Spend Approver 2	Not Required		01/04/2019		
Purchase Order Event	Approval by Project Manager	Not Required		01/04/2019		
Purchase Order Event	PO Contract Compliance	Not Required		01/04/2019		
Purchase Order Event	Approval by Sherwin Williams Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by TriMark SS Kemp Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by Spend Category Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by Supplier Specific Buyer	Not Required		01/04/2019		
Purchase Order Event	Approval by Staples Buyer	Not Required		01/04/2019		
Purchase Order Event	Approval by Granite Buyer Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by Amazon Buyer Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by Medical Supplier Non-Catalog Approver	Not Required		01/04/2019		
Purchase Order Event	Approval by IT Manager	Not Required		01/04/2019		
Purchase Order Event	Approval by Department Head	Not Required		01/04/2019		
Purchase Order Event	Approval by Department VP	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center Executive Director	Not Required		01/04/2019		

Process	Step	Status	Completed On	Due Date	Person	Comment
Purchase Order Event	Approval by Cost Center Regional Director - Operations	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center Divisional Vice President	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center Budget Director	Not Required		01/04/2019		
Purchase Order Event	Approval by Cost Center COO	Not Required		01/04/2019		
Purchase Order XML Issue Event	Purchase Order XML Issue Event	Step Completed	12/28/2018 07:42:10 PM	12/29/2018	Carlie Quillen	
Purchase Order XML Issue Event	Integration: cXML	Completed	12/28/2018 07:42:13 PM	12/29/2018		
Purchase Order XML Issue Event	Integration: cXML - Amazon	Not Required		12/29/2018		

Integrations

Started Date and Time	Process Type	Process	Schedule	Request	Status	Total Processing Time	Submitted by	Errors & Warnings
12/28/2018 07:42 PM	Integration	cXML	cXML	cXML	Completed [Parent: Successfully Completed]	00:00:02	sysuser:cXML	

Balances

Line and Line Splits	Obligation Quantity	Obligation Quantity Liquidated	Obligation Quantity Remaining	Obligation Amount	Obligation Amount Liquidated	Obligation Amount Remaining	Currency
PO-00255637 - Line 1	1	1	0	65.63	65.63	0.00	USD
			Total:	65.63	65.63	0.00	