N 831 1200-8-6-08 (1) Building Standards

(1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.

This Rule is not met as evidenced by:
Based on observation, it was determined the facility failed to maintain the overall nursing home environment.

The finding included:
Observations in room 210 on 5/7/12 at 11:24 AM, revealed damage to the exterior wall. The damage included paint scraped away and kick strip peeled away from the wall.

This finding was verified by the maintenance director and the facility administrator during the exit conference on 5/7/12.

N 832 1200-8-6-.08 (2) Building Standards

(2) After the applicant has submitted an application and licensure fees, the applicant must submit the building construction plans to the department. All new facilities shall conform to the 2006 edition of the International Building Code, except for Chapter 11 pertaining to accessibility and except for Chapter 27 pertaining to electrical requirements; the 2006 edition of the International Mechanical Code; the 2006 edition of the International Plumbing Code; the 2006 edition of the International Fuel and Gas Code; the 2006 edition of the National Fire Protection

Corrective Action for Resident Cited

Room 210 - The exterior wall will be repaired, sanded and painted and the cove base secured to the wall.

Identification Other Residents
Residents in room 210 have the potential to be effected by this deficient practice. A comprehensive physical plant audit will be conducted by the director of maintenance (or their designee) to identify repair needs.

Measure Put in Place or System Changes
The Director of the Maintenance department will be educated and instructed by the administrator to conduct a monthly comprehensive facility audit to identify areas needing repair. These audits will be conducted and the needs identified.

Monitoring Corrective Action
The Director of the Maintenance department will submit monthly comprehensive facility plant audits along with the corrective actions to the Quality Improvement committee on a monthly basis for review. The administrator will be responsible for reviewing these reports. Findings will be analyzed and QI Committee will evaluate the effectiveness of present plan and will recommend revisions as needed.

QI committee members include but are not limited to Administrator, DON, Medical Director, Medical Records and Social Services.

RECEIVED
N 832  Continued From page 1

Code (NFPA) NFPA 1 including Annex A which incorporates the 2005 edition of the Life Safety Code, the 2010 Guidelines for Design and Construction of Health Care Facilities; the 2005 edition of the National Electrical Code; and the 2005 edition of the U.S. Public Health Service Food Code as adopted by the Board for Licensing Health Care Facilities. The requirements of the 2004 Americans with Disabilities Act (A.D.A.), and the 1999 edition of North Carolina Handicap Accessibility Codes with 2004 amendments apply to all new facilities and to all existing facilities that are enlarged or substantially altered or repaired after July 1, 2006. When referring to height, area or construction type, the International Building Code shall prevail. Where there are conflicts between requirements in local codes, the above listed codes and regulations and provisions of this chapter, the most stringent requirements shall apply.

This Rule is not met as evidenced by:
Based on observation, it was determined the facility did not comply with the requirements of the 2004 Americans with Disability Act.

The finding included:

Observations of an exit ramp leading out from the dining room on 5/7/12 at 10:56 AM, revealed a lip at the bottom that was greater than one inch.

This finding was verified by the maintenance director and the facility administrator during the exit conference on 5/7/12.

N 832

Corrective Action for Resident Cited

The Lip on the exit ramp leading out from the Dining room on the first floor has been repaired.

Identification Other Residents
All residents have the potential to be effected by this deficient practice. A comprehensive physical plant audit will be conducted by the director of maintenance (or their designee) to identify repair needs.

Measure Put In Place or System Changes
The Director of the Maintenance department will be educated and instructed by the administrator to conduct a monthly comprehensive facility audit to identify areas needing repair. These audits will be conducted and the needs identified.

Monitoring Corrective Action

The Director of the Maintenance department will submit monthly comprehensive facility plant audits along with the corrective actions to the Quality Improvement committee on a monthly basis for review. The administrator will be responsible for reviewing these reports. Findings will be analyzed and QI Committee will evaluate the effectiveness of the present plan and will recommend revisions as needed.

QI committee members include but are not limited to Administrator, DON, Medical Director, Medical Records and Social Services.