STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL001103	A. BUILDING: **01** B. WING _____	**02/11/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A VISION COME TRUE	**220 HATCH STREET** **BURLINGTON, NC 27217**

(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 This Report is of a Biennial Construction Survey done by Bob Getchell on February 11, 2015. This Facility was first licensed or submitted for licensure as a Home for the Aged serving 12 residents on or about April 29, 2003. Therefore the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 2002 North Carolina State Building Code Section 407- Institutional Occupancy, Group I-2. Deficiencies were noted which will require a new plan of correction.	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, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost; This Rule is not met as evidenced by: 1. Based on observation, the building was not	C 101		

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C 101	Continued From page 1 maintained in a safe manner by not installing the fire-resistance rating of building components. This could effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings on 2/11/2015: a. The 1st floor smoke barrier wall over the cross corridor doors appears to have gypsum installed on only one side of the wall above the ceiling tiles. This is not in accordance with the requirement that smoke barrier walls are built as 1 hour fire resistance rated walls. Ensure that both sides of the wall are finished with 5/8 gypsum to maintain the fire resistance rating of the wall.	C 101		
C 148	Corridors-Handrails SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load; This Rule is not met as evidenced by: 2. Based on observation, the building was not maintained in a safe manner because a handrail is coming loose. This would effect all residents using the handrail by exposing them to fall hazards Findings on 2/11/2015: The handrail is coming loose near the janitors closet.	C 148		

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C 166	Continued From page 2	C 166		
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: 3. Based on observation, the building was not maintained in a safe manner because of an excess of storage of combustibles. This would effect all residents by exposing them to an increased risk of a fire. Findings on 2/11/2015: The following areas were found to have an excess of stored items: a. Upstairs bedroom on left end of building, b. Upstairs back right bedroom.	C 166		
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	C 185		

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C 185	Continued From page 3 description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 4. Based on observation, the building was not maintained in a safe manner by not conducting fire drills on each shift during each quarter. a. Records indicate 3rd shift fire drills were not done in the first quarter.	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: 5. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings on 2/11/2015: The following areas have unprotected penetrations: a. restroom door at office has holes in door at knob, b. In the smoke barrier wall above the cross corridor doors there is a wire	C 189		

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C 189	Continued From page 4 penetration, c. Storage room door at room 4 has holes in door at knob, d. A sprinkler escutcheon is missing in the ceiling at the top of the stairs. 6. Based on observation, the building exit signage and emergency illumination were not maintained in a safe manner. This would effect all residents by not keeping the exits visible in an emergency. Findings on 2/11/2015: Exit signs and emergency lights are not working in the following locations: a) Exit sign at 1st floor kitchen door not working on battery backup, b) The light in the upstairs fire escape stair is not working. 7. Based on observation, the building was not maintained in a safe manner by not protecting the sprinkler components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. a. There are items stored in the resident closets that are within 18 inches of the sprinkler heads. Provide clearance. 8. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of doors. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. a. The storage room accross from the dining room is missing the pin in the top hinge, b. The fire door at the bottom of the interior stairwell is scrubbing the frame.	C 189		

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C 189	Continued From page 5 9. Based on observation, the building was not maintained in a safe manner because a toilet is disassembled and out of service. This would effect all residents by reducing the number of availoable toilets. Findings on 2/11/2015: The hall bathroom near the cross corridor doors has a toilet in the process of being replaced.	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: 10. Based on observation, the building exhaust ventilation was not maintained in accordance with this Rule. Findings on 2/11/2015: The exhaust fan in the Janitors closet is not working.	C 199		

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