STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL060130	A. BUILDING: **01** B. WING _____	C **06/02/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE CROSSINGS AT STEELE CREEK	**13600 S TRYON ST** **CHARLOTTE, NC 28278**

(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 Complaint Investigation by Billy S. Bryant conducted on 06/02/2015. Records indicate this facility was first licensed or submitted for licensure on 07/03/2014 as a HA. The facility is currently licensed for 90 Beds with a 48 Bed Special Care Unit. Therefore the facility is required to comply with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and the applicable portions of the 2009 Edition of the North Carolina Building Code(s), Institutional Occupancy. The complaint was as follows: The resident room bathrooms floors were slippery due to water migrating out from the shower enclosure. A crack was visible in a false beam in the S.C.U. dining room area. A resident from the secured S.C.U. had "eloped" because a door locking system had malfunctioned. The complaint was substantiated, but in reference to the complaints, the facility was in compliance with DHSR rules and regulations at the time of the investigation, however; other deficiecies were found that require 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,	C 101		

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C 101	Continued From page 1 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: I. Based on observation the facility did not meet the current building code requirements for special locking systems due to items required by code were not supplied. A. Findings on 06/02/2015: 1. The facility did not have a wiring diagram and system components location plan under glass and adjacent to the fire alarm panel. 2. The locking system manual override switches were installed with locked protective covers and each care giver did not have keys to unlock the covers to enable access to the override switches	C 101		
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; This Rule is not met as evidenced by:	C 160		

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C 160	Continued From page 2 I. Based on observation the outside grounds were not maintained in a safe condition due to improper backfill and fine grading of sitework construction. Residents using the exterior areas would be exposed to possible tripping hazards. A. Findings from 06/02/2015: 1. The side walk in the facility S.C.U. wing courtyard and in the assisted living wing courtyard was approximately 3" above the adjacent grade in some areas. 2. There were holes approximately 6" to 8" deep located immediately below rain gutter downspouts. 3. In the assisted living wing courtyard a catch basin area drain with a slotted iron grate was installed too low below grade causing the surrounding ground to slope down at severe angle to the drain creating a fall hazard.	C 160		
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: I. Based on observation fire safety equipment was not maintained in a safe manner due to	C 189		

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C 189	Continued From page 3 some safety components being modified. All residents could be effected if the safety equipment did not fully function as required thus allowing smoke and fire to not be confined to the compartment of origin. A. Finding on 06/02/2015: 1. The fire resistant rated doors in the special care unit that are required to completely close and latch had part of their latching panic hardware assembly and components removed. Modification of fire resistant rated doors and any of their associated components including hardware compromises the fire resistant rating of the door. 2. The fire resistant rated door that had been forced open by a resident was cracked and near the top and had a temporary thru bolt repair. Damage to a fire resistant rated door compromises the fire resistant rating of the door. II. Based on observation the electrical equipment was not kept in operating condition, lighting devices were not fully functional. A. Finding from 06/02/2015. 1. The light bulbs in several corridor ceiling hung multi-light fixtures were burned out and require replacement.	C 189		