STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL076032	A. BUILDING: **01** B. WING _____	**08/11/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NORTH POINTE ASSISTED LIVING OF ARCHD.	**303 ALDRIDGE ROAD ARCHDALE, NC 27263**

(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 and Frank Strickland on August 11, 2015. This facility was first licensed as a Home for the Aged serving 56 residents on 11-20-1997. Therefore, this facility is required to meet the 1996 and the applicable portions of the 2005 Rules 10A NCAC 13F for the Licensing of Adult Care Homes, and, the 1996 NC State Building Code, Group I-2, Unrestrained Occupancy. Deficiencies were noted which will require a new ploan 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 fire	C 101		

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C 101	Continued From page 1 protection equipment was not maintained to keep the facility safe. This would affect all residents if the equipment failed to detect smoke and activate the fire alarm. Findings include: a. The Maglock overide switch at the 100 Hall Exit door is not working. (Door will release with keypad and upon alarm)	C 101		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Based on observation, the facility was not maintained in a safe manner by having a loose grab bar at the toilet. Findings include: Grab bars at the toilet were loose in the following locations: a) 100 Hall Spa b) Mens Parlor bathroom c) 300 Hall, Room 16 bathroom, The downstairs bathroom has no grab bar at the toilet.	C 133		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 164		

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C 164	Continued From page 2 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: 7. Based on observation, the building housekeeping and furnishings were not maintained in good condition. Findings include: a) Along the left wall in the Parlor the baseboard has been removed. b) In the 100 Hall Spa there is mildew growing on the shower walls	C 164		
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 building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would affect all residents by not containing	C 189		

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C 189	Continued From page 3 smoke and fire in the room or smoke compartment of origin. Findings include: a) The attic smoke barrier wall over SCU room 1 has the tape coming loose. b) The attic smoke barrier wall above room 1 on the 100 Hall was penetrated by i) two unprotected sprinkler pipes and ii) a 4" PVC pipe which is not protected by a fire collar or other listed method of protection. c) The exterior mechanical room has the following issues: i) 3 Fire collars have been installed to protect ceiling penetrations, however none of the fire collars are fastened to the ceiling. ii) There is a gap at the sprinkler escutcheon, iii) The ceiling is split open, iiii) There is a gap at the heat detector, iiiii) `There are some 3" PVC penetrations in the ceiling over the electrical panels that are not protected by a fire collar. d) The speakers mounted on the corridor walls have unprotected ceiling penetrations by wire over them. e) The cameras mounted on the ceilings have unprotected ceiling penetrations by wire next to them. f) Sprinkler escutcheon on front porch has dropped. These unprotected openings are not in conformance with the requirement to use a through penetration fire stop system that has been tested in accordance with ASTM E-814. 2. Based on observation, the facility was not maintained in a safe manner by having fire rated doors that did not close completely in order to contain smoke and fire. This could affect all residents and staff by not containing smoke and fire in the fire compartment or room of origin.	C 189		

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C 189	Continued From page 4 Findings include: a) The cross-corridor doors near room 12 on the 300 Hall did not close completely when activated by the fire alarm system. b) In the Laundry Clean Linen Room there is a 1-hr fire rated maintenance access door in the wall separating the Laundry from the clean linen room that has been opened and used as a plumbing chase. c) At the kitchen where a 20 minute fire door has been wedged open 3. Based on observation, the facility exterior components were not maintained in good condition by having damaged soffit. Findings include: In the courtyard between the 100 and 300 halls, the 100 Hall soffit is falling down. 4. Based on observation, the building was not maintained in a safe manner by improper storage of oxygen cylinders. This would affect all residents by potentially exposing them to hazards from a ruptured cylinder. Findings include: Some of the oxygen bottles are being stored loose 5. Based on observation, the building emergency illumination was not maintained in a safe manner. This would affect all residents by not keeping the path to an exit visible in an emergency. Findings include: The Emergency light is not working at the Documentation Room	C 189		

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C 189	Continued From page 5 6. Based on observation, the building plumbing equipment was not maintained safe and operating. Findings include: a) The Womens Parlor bathroom has a toilet coming loose from the floor. Secure. b) In the 100 Hall Spa the cabinet door is falling off the whirlpool bath.	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: 1. Based on observation, the building exhaust ventilation was not maintained in accordance with this Rule. Findings include: The exhaust fans are not working in the following locations: a) In the Mechanical Room at the kitchen,	C 199		

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C 199	Continued From page 6 b) In the bathroom at Room 11	C 199		