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	HAL036031	A. BUILDING: **01** B. WING _____	**09/24/2015**

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C 000	Initial Comments Report of a Biennial Construction Survey by Ed Miller September 24, 2015. Records indicate this facility was first licensed on October 1, 1988 as a Home for the Aged. The facility is a Special Care Unit with 48 beds. Therefore, this facility is required to meet the 1987 Homes for the Aged and Disabled Minimum Standards and Regulations, applicable portions of the 2005 Rules 10A NCAC 13F for Adult Care Homes of Seven of More Beds and the 1978 (Revision 10) North Carolina State Building Code with emphasis on Section 409.1, Institutional Occupancy. Physical plant deficiencies were noted which require a plan of correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, interview with Executive Director, and Maintenance Contractor, the facility failed to maintain, a current (completed within the last twelve months) annual inspection report(s) required. This deficiency affects all residents, staff and visitors by not preventing any systems deficiency that may be discovered with annual inspections. Findings on September 24, 2015: a. Records indicate that the last Fire Sprinkler	C 111		

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C 111	Continued From page 1 System Inspection and Testing report in accordance with NFPA 25 was performed in April 29, 2014, exceeding the requirement to have the system inspected and tested at least annually to insure that the system works properly.	C 111		
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 failed to ensure that commodes, tubs and showers are equipped with stable hand grips. This deficiency affects all residents who use these unstable fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on September 24, 2015: a. There was a loose hand grips (grab bar) at the, tub in the Spa near Bedroom 61.	C 133		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule;	C 135		

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C 135	Continued From page 2 This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that resident toilet rooms and bathrooms are not utilized for storage or purposes other than those indicated in rule. This deficiency affects all residents and staff who would not have the fixtures and/or space for the services needed. Findings on September 24, 2015: a. The Spas were being used as storage of mop buckets, mops, and old dirty furniture.	C 135		
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: 1. Based on observation, the outside grounds were not maintained in a clean and safe condition. This could affect all residents, staff and visitors if the grounds are not free of obstructions, tripping hazards or have equipment in disrepair. Findings on September 16, 2015: a. The back and left side of the site was littered with trash, b. A wooden board with 4 large nails pointing up was lying near the building in the Courtyard. Deficiency corrected before Construction Surveyors departed Site.	C 160		
C 164	Housekeeping and Furnishings-Clean, Repaired	C 164		

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C 164	Continued From page 3 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND 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: 1. Based on Observation, the facility failed to provide necessary equipment to ensure clean potable water supply. Findings on September 24, 2015: a. The ice machine in the Kitchen had an indirect drain, piped directly onto the floor receptor, resulting in the potential for the drain line to clog and contaminate the machine. b. The bath tub in the Spa near Bedroom 61 had a hose long enough to reach gray water that was not equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing lines. 2. Based on Observation, the facility failed to have walls, ceilings, and floors or floor coverings, kept clean and in good repair. Findings on September 24, 2015: a. The ceiling in Bedroom 48 had a stain and two large paint bubbles. b. In Bedroom 71 the Bathroom door was marred up. 3. Based on observation, the facility has failed to maintain the building in a safe and operating manner. Findings on September 24, 2015: a. The transition strip at the corridor door to	C 164		

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C 164	Continued From page 4 the Women's Visitor's Toilet Room was duct tape.	C 164		
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: 1. Based on Observation, the facility failed to provide an environment in accordance with this Rule, by not maintaining the HVAC/ventilation, grilles and their associated dampers free of hazards. This could affect all residents, staff and visitors if in the event of a fire the dampers do not close completely to contain the fire within the room of origin. Findings on September 24, 2015: a. The return HVAC and ventilation grilles and their radiation dampers have an excessive accumulation of dust/lint. Locations of specific examples include but are not limited to: i. Dining Room, ii. Laundry. iii. Janitor's Closet 2. Based on observation, the Building plumbing equipment was not maintained in a safe manner by not have properly working or installed parts. This could affect all residents, staff and visitors by not protecting them from falls or injury due to broken or missing parts. Findings on September 24, 2015:	C 166		

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C 166	Continued From page 5 a. The connection of the commode to the floor was loose in the right Spa.	C 166		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas, with the required individual towels and/or towel bars for each resident. Findings on September 16, 2015: a. Most residents' rooms including the adjoining toilet rooms did not provide a means for each resident to hang a separate towel.	C 175		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to	C 183		

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C 183	Continued From page 6 provide and/or maintain the fire extinguishers and associated equipment. This would affect all residents, staff and visitors by not having emergency equipment in proper working order. Findings on September 24, 2015: a. The portable water based extinguisher in the Kitchen, had its annual maintenances last performed on July, 2008, and had no documentation of monthly inspections on the maintenance tag. A second portable extinguisher was within the Kitchen.	C 183		
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 description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with Manager the facility failed to adequately document the rehearsals. This deficiency affects all residents, staff and visitors by not having trained staff and trained/cooperative residents when a there is a need to evacuate the building. Findings on September 24, 2015: 1. The fire plan rehearsal records provided no	C 185		

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C 185	Continued From page 7 description of what the rehearsal involved only list of staff and training that followed. 2. The facility had three working shifts daily and there was no records of first shift rehearsals for, fourth quarter, and no third shift rehearsals for, second, third and fourth 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: 1. Based on observation, the Building was not maintained in a safe and operating condition, because the electrical power system was not being operated or maintained safely. This would affect all staff, by allowing unsafe conditions to persist. Findings on September 24, 2015: a. Two of the four lens on the light fixtures were falling down in the Dining Room. 2. Based on observation, the building was not maintained in accordance with NC Electrical Code because of improper wiring method. This would affect all residents, staff and visitors by exposing them to potential fire hazard. Findings on September 24, 2015: a. The exterior light pole in the courtyard had	C 189		

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C 189	Continued From page 8 two exposed cables. One appeared to be standard Romex and both were not secured, creating a tripping hazard. 3. Based on observation, the Building was not maintained in a safe and operating condition, because the emergency lighting, which illuminates the egress pathways during power outages, did not work properly. This would affect all residents, staff and visitors if the egress pathways were not illuminated during the power outages and there was no other illumination. Findings on September 24, 2015: a. In the Dining Room ,the emergency lights for the wall mounted self-contained combination exit sign/emergency light unit did not work on backup power when the test button was pushed. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the fire sprinkler escutcheon plates were impaired, exposing openings through the ceiling that could allow the passage of smoke and heat. This would affect all residents, staff and visitors, if the fire suppression system does not operate in a timely manner and cannot contained fire in the Room of origin. Findings on September 24, 2015: a. The fire sprinkler escutcheon plate had dropped down from the ceiling in the exterior Mech Room near Bedroom 45. 5. Based on observations, the Building was not maintained in a safe and operating condition, because breaches through the fire-resistance-rated construction invalidated its integrity. This could affect all residents, staff and visitors if smoke/fire is not contained in Room or compartment of origin. Findings on September 24, 2015:	C 189		

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C 189	Continued From page 9 a. Unprotected ceiling penetration around commercial kitchen hood's fire extinguishing systems pipes/conduits in Kitchen. b. In the Janitor Closet, a cable bundle was not properly firestopping where it penetrates the fire-resistance-rated ceiling assembly. 6. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire extinguishing system lacked the inspections, maintenance and documented required to ensure a properly working system. This could affect all residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on September 24, 2015: a. Since the semi-annual maintenance of the commercial kitchen hood's fire extinguishing system in June 2015, there has been no record keeping of the monthly inspections. 7. Based on observation, the Building was not maintained in a safe and operating condition, because the electrical power system was not being operated or maintained safely. This would affect all staff, by allowing unsafe conditions to persist. Findings on September 24, 2015: a. In the Mech Room across from RCC/SCC office had many items are being stored directly in front of the electric panel, encroaching upon the required clear working space. 8. Based on Observation, the Building was not maintained in a safe and operating condition, because some corridor doors were held open by devices that do not release with a push or pull of the door, preventing the doors from being closed and latched rapidly. This could affect all	C 189		

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C 189	Continued From page 10 residents, staff and visitors by not containing smoke and fire in the room of origin. Findings on September 24, 2015: a. Corridor doors to the RCC/SCC Office and Mech Closet across RCC/SCC Office had a mechanical kick-down holding the door open. 9. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors did not resist the passage of smoke due to the doors not positively/automatically latching into their frame under normal closing force. This could affect all residents, staff and visitors if the doors were not latched and did not contain smoke/fire in the room of origin. Findings on September 24, 2015: a. The Living Room door had its latch bolt installed backwards and the door would not latch.	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.	C 199		

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C 199	Continued From page 11 This Rule is not met as evidenced by: 1. Based on Observation and testing the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff and visitors by subjecting them to odors. Findings on September 24, 2015: a. The exhaust ventilation was running but did not remove the required amount of air in the Men's Visitors Toilet Room, b. The exhaust ventilation was not working in the Med Room Toilet Room, c. The exhaust ventilation in Bedroom 48's shared Bathroom was partially blowing backwards.	C 199		