STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL039009	A. BUILDING: **01** B. WING _____	R **10/22/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANVILLE HOUSE	**200 COVENTRY DRIVE OXFORD, NC 27565**

(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 Followup Survey done by Bob Getchell on October 22, 2015. The followup survey revealed that all deficiencies were not corrected, therefore a new plan of correction is required.	{C 000}		
{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 observations, the facility has not maintained in a safe manner by preventing smoke barrier doors from closing rapidly in order to contain smoke and/or fire. This condition could affect all residents and staff by not containing smoke and/or fire in the compartment of origin. Followup Findings on October 22, 2015: The right-hand side smoke barrier that faces the exterior exit in the Special Care Unit does not close all the way to the door jambs to prevent the passage of smoke. 3-Based on observation, the facility has not maintained in a safe manner due to breaches through the fire-rated construction has invalidated its integrity. This could affect all residents and	{C 189}		

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{C 189}	Continued From page 1 staff in the event that fire and/or smoke is not contained in a room or compartment of origin. Followup Findings on October 22, 2015: There are two 4" PVC electrical conduit penetrations through the one-hour roof/ceiling assembly that are located in the Electrical Equipment Room next to the Kitchen that are not equipped with a fire collar or other approved firestop system. 9-Based on observation, the facility has not maintained in a safe and operating condition the placement of storage materials in secured areas. This could affect all residents and staff in the event of a fire to support combustion. Followup Findings on October 22, 2015: The are an excessive amount of plastic HVAC cover grillles from PTAC units and refrigerant bottles in cardboard boxes in the Electrical Equipment Room that is adjacent to the Kitchen.	{C 189}		