PRINTED: 01/20/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034012	A. BUILDING: 01 B. WING ______	01/07/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHULER HEALTH CARE/RECORD VILLA	250 PITT STREET KERNERSVILLE, NC 27284

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C 000	Initial Comments This report is of a Biennial Construction Survey done by Bob Getchell on January 7, 2016. This facility was first licensed as a Home for the Aged serving 12 ambulatory residents on October 25, 1979. Therefore the facility must meet the 1977 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1978 North Carolina State Building Code Section 409 - Institutional Occupancy. 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 at no cost; This Rule is not met as evidenced by: 1. Based on observation, the building fire detection equipment was not installed in all	C 101		

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C 101	Continued From page 1 spaces in accordance with the NC State Building Code in effect at the time of construction. This would affect all residents by not detecting smoke, activating the fire alarm, and directing residents from the building. Findings include: a) The Med room has no smoke detection or heat detection tied into the fire alarm b) The corridor bathrooms have no smoke detection or heat detection tied into the fire alarm.	C 101	The alarms are in the hallways outside of areas noted. All governing agencies have always approved of footage and safety of devices in place since 1981.	
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 observation, current reports were not available at the time of the survey. X Findings include: The Sanitation report for the building was not available at the time of the survey. X	C 111	These reports were copied at the visit and you stated you did not need the copies. You reviewed records and gave them back to me.	1-7-16
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.	C 150		

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C 150	Continued From page 2 This Rule is not met as evidenced by: 1. Based on observation, egress from all areas was not maintained in a safe manner by having corridors blocked by furniture. This would affect all residents by not allowing free egress in an emergency. Findings include: The exit corridor has wall-mounted shelves and end tables extending into the corridor reducing the width of the corridor to less than 5 feet.	C 150	The measurements in the hallway are 59" and 56" of hallway. The small tables are there for extra lighting at night for residents. The fire marshall approved them but if we must move them we will. I can send pic if needed. There are no obstructions.	
C 164	Housekeeping and Furnishings-Clean, Repaired 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, some building components were not maintained in clean, repaired condition. Findings include: a) Throughout the building the HVAC return vents and their associated radiation dampers are covered with dust and dirt which could interfere with the damper activating properly in a fire emergency.	C 164	These have been cleaned with a shop vac.	1-10-16
C 189	Building Equipment Maintained Safe, Operating	C 189		

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C 189	Continued From page 3 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 smoke and fire in the room or smoke compartment of origin. Findings include: a) The attic draft wall has a 2 foot by 2 foot section of gypsum cut out of it. b) The Kitchen Pantry has unprotected penetrations in walls and cilings by pipe and cable. c) The ceiling HVAC return vent in the kitchen is falling down d) The ceiling in the Laundry has split open e) The personal closet ceiling next to the managers apartment has a wall/ceiling joint separating and penetrations have been sealed with an unrated orange foam. f) Room 1 has unprotected penetrations in the bedroom and closet ceiling, and a ceiling/wall joint separating. g) Room 2 has a ceiling/wall joint separating, and wall damage near the closet. h) Room 3 has a ceiling/wall joint separating. i) Room 4 has a hole in the wall at the closet,	C 189	all repairs are being done now.	2-20-16

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C 189	Continued From page 4 and a nail pop in the ceiling. j) Room 5 has a wall/ceiling joint separating. ✓k) Living Room has an unprotected ceiling penetration in the ceiling at the Exit ✓l) The Kitchen has an unprotected penetration by phone line at the Dining Room door. 2. Based on observation, the facility components were not maintained operable by having doors that did not close completely and latch. Findings include: a) Room 1 has a roller latch that does not work because it releases with less than 5 pounds of force. b) Room 4 has a roller latch that does not work because it releases with less than 5 pounds of force. c) Room 6 has a roller latch that does not work because it releases with less than 5 pounds of force. d) The left Exit door will not close and latch when released 3. Based on observation, the building emergency illumination and exit signs were not maintained operable. Findings include: a) The Exit sign in the corridor outside the Managers apartment has no battery backup b) The emergency light in the Dining Room is not working. 4. Based on observation, the building electrical system was not maintained to keep the facility safe by having water in an electrical disconnect box. This would affect all residents by potentially shorting out electrical circuits in the building.	C 189	Repairs are being done currently	2-20-16

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C 189	Continued From page 5 Findings include: a) In the Laundry the electrical disconnect box closest to the back door has a knockout missing in the bottom right of the panel. b) The Laundry electrical disconnect box has water dripping out of the bottom of it.	C 189	This facility will watch for reported findings on the facility monitoring reports which are done 6 x a year. This is part of our quality assurance.	2-30-16