STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL043006	A. BUILDING: **01** B. WING _____	**07/13/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SENIOR CITIZENS VILLAGE	**504 WEST CANAL DRIVE** **DUNN, NC 28334**

(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 on July 13, 2016. This facility was first licensed as a Home for the Aged with a capacity of (65) Sixty-Five Residents on or about July 1, 1978. Therefore the facility must meet the 1967 North Carolina State Building Code - Institutional Occupancy; the 1977 Minimum Standards and Regulations for Homes for the Aged; and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds. An addition from 1985 included an Activity Room. This addition must meet the 1978 North Carolina State Building Code-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	C 101		

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C 101	Continued From page 1 Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Based on observation, the building fire alarm system does not meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration. This would affect all residents by not allowing free egress in an emergency Findings include: The Activity Room closet has no detection device installed and connected to the fire alarm system	C 101		
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. Findings include: The following reports were not available at the time of the survey: a) Sanitation report for the building, b) Fire Marshalls Report, c) Fire Alarm Panel Annual Test Report	C 111		
C 133	Bathrooms-Hand Grips	C 133		

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C 133	Continued From page 2 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 not providing securely fastened hand grips in the bathrooms and/or toilet rooms Findings Include: The following areas have loose hand grips: a) Room 127 bathroom b) Shower room near room 120, c) Room 110 bathroom	C 133		
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 building was not maintained free of hazards by improper storage of oxygen cylinders. This would affect all residents by potentially exposing them to hazards from a ruptured cylinder.	C 166		

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C 166	Continued From page 3 Findings include: Unsecured oxygen bottles were found in the following locations: a) Two bottles unsecured in corridor under the fire panel. b) Two bottles unsecured in room 129 c) The Nurses Storage Room on the corridor has 4 oxygen bottles unsecured.	C 166		
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 building fire protection equipment was not maintained to keep the facility safe. This would affect all residents by not having fire protection equipment operable for use in an emergency. Findings include: a) The inspection tags on the fire extinguishers indicate that routine monthly inspections are not being performed per NFPA 10 b) The inspection tags on the Ansul hood suppression system indicate that routine monthly inspections are not being performed per NFPA 17A	C 183		
C 189	Building Equipment Maintained Safe, Operating	C 189		

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C 189	Continued From page 4 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 left attic fire wall was penetrated by multiple open sleeves containing pipes and cables that are not sealed with an approved firestop system. b. The right attic fire wall was penetrated by multiple open sleeves containing pipes and cables that are not sealed with an approved firestop system. c. The left draftstop wall has numerous unprotected penetrations by pipe and cable. d. The right draftstop wall has numerous unprotected penetrations by pipe and cable. e. Throughout the building there are unprotected penetrations in the corridor ceiling by cables next to the cameras and wi-fi transmitters.. f. The draftstop doors need a hook to secure the doors in the closed position. g. Throughout the building the resident rooms have an unprotected CATV cable penetration in	C 189		

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C 189	Continued From page 5 the bedroom ceiling. h. The water heater room near vending has unprotected penetrations in the ceiling. i. The kitchen ceiling has unprotected penetrations by conduit over the Ansul control box and the Ansul pull station j. Nurses station has unprotected ceiling penetrations by wire k. Exterior Electrical Room has unprotected ceiling penetrations l. The corridor wall near the fire panel has been patched with a plastic cover which does not maintain the fire-resistance rating of the wall. 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 components were not maintained operable by having doors that did not close completely and latch. Findings include: The following doors have issues: a) Bedroom 136 has a corridor door that scrubs the frame and is hard to close and latch, b) Bathroom door near room 140 is being held open by a kickdown c) Beauty Shop door is beiing held open by a wedge. d) Dining Room corridor door is being held open by a wedge. e) Downstairs bathroom door frame is missing the strike plate. f) The exterior gate on the back right is chained shut. 3. Based on observation, the building electrical	C 189		

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C 189	Continued From page 6 system was not maintained to keep the facility safe. This would affect all residents by potentially overloading electrical circuits in the bedrooms. Findings include: Electrical problems were noted in the following locations. a) Room 134 has an outlet expansion device b) Room 138 has an outlet at the sink that is not GFCI protected, c) Room 139 has an outlet at the sink that is not GFCI protected d) Room 133 has an outlet expansion device e) Room 130 has an outlet expansion device, f) Room 131 has an outlet cover missing, g) Room 112 has an outlet expansion device. 4. Based on observation, the building plumbing equipment was not maintained operable. This could expose residents to a slip and fall hazard. Findings include: Toilets are coming loose from the floor in the following locations: a) Room 121 bathroom b) Room 122 bathroom c) Shower Room near room 108 5. Based on observation, the building emergency illumination were not maintained in a safe manner. This would affect all residents by not keeping the exits visible in an emergency. Findings include: Exit signs and emergency lights are not working in the following locations: a) Emergency Light near room 120 not working on battery backup, b) Emergency Light near room 104 not working on battery backup,	C 189		

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C 189	Continued From page 7 c) Emergency Light near room 110 not working on battery backup, 6. Based on observation, windows were not maintained operable to provide ventilation. Findings include: a) Throughout the building the bedroom windows have been painted shut and can not be opened for fresh air.	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 has the following issues:	C 199		

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C 199	Continued From page 8 a) Room 134 has no exhaust fan in the bathroom b) Room 135 has an exhaust fan in the bathroom that is not working c) Room 136 has an exhaust fan in the bathroom that is not working d) Shower Room near room 120 has an exhaust fan that is not working e) Room 118 has an exhaust fan in the bathroom that is not working f) Bathing Room near room 106 has an exhaust fan that is not working g) Shower Room near room 108 has an exhaust fan that is not working h) Office bathroom has an exhaust fan that is not working i) The exhaust fan over room 139 has an exhaust duct that has come loose in the attic allowing the fan to vent into the attic	C 199		