STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL030003	A. BUILDING: **01** B. WING _____	**08/02/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DAVIE PLACE RESIDENTIAL CARE	**337 HOSPITAL STREET MOCKSVILLE, NC 27028**

(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 Report of Biennial Construction Survey by Dennis Harrell on 8-2-2016. Records indicate that the older portion of this facility was originally licensed on 7-1-1966. The 400 hall was added later in 1997 and was built fully sprinklered. The facility is now fully sprinklered. Based on this information we are requiring the older portions of the building to meet the 1971 Minimum and Desired Standards and Regulations for Homes for the aged and Infirm and the applicable portions of the current Rules for Adult Care Homes of Seven or More Beds. The 400 hall must meet the 1996 NC State Building Code, the 1993 Rules for the Licensing of Domiciliary Homes, and the applicable portions of the current Rules for Adult Care Homes of Seven or More Beds.	C 000		
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: Based on observation, there was no hand grip provided at the shower in the shower room on the 400 Hall.	C 133		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT	C 185		

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C 185	Continued From page 1 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: Based on review of documents, fire drill rehearsals had not been done since December of 2015. Failure to rehearse the fire plan could lead to confusion and delay in an actual emergency.	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 fire doors near the main office would not close completely and latch due to a failure of the co-ordinator device. Fire	C 189		

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C 189	Continued From page 2 doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. 2. Based on observation, several corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include; a. The door to the mop room on the 200 Hall was equipped with only a dead-bolt latch. Dead-bolts cannot automatically latch to contain a fire and smoke. b. The latch bolt was missing on the door to the linen closet on the 400 Hall. c. The door to bedroom 304 could not close and latch because it was obstructed with furniture. d. The door to bedroom 108 would not latch when closed. e. The door to the linen closet on the 200 Hall would not latch when closed. f. The door to bedroom 301 would not latch when closed. 3. Based on observation, several battery powered emergency lights would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. Findings include the following malfunctioning lights: a. Special Care bathroom, b. 300 Hall Dining room, c. 300 Hall bathroom.	C 189		