STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL051024	A. BUILDING: **01** B. WING _____	**02/16/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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C 000	Initial Comments Construction Section Biennial Survey by Billy S. Bryant and Ed Miller conducted on 02/16/2017. Records indicate this facility was first licensed on 11/20/1997. The facility is currently licensed for 74 Beds including a 24 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1007 Rev) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	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 review of documentation the facility failed to have current (within the calendar year) required inspection reports maintained on site for review by the surveyor. Finding on 02/16/2017: a. The facility did not have a current fire sprinkler inspection report showing the fire sprinkler systems were completely functional and free from defects.	C 111		

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C 164	Continued From page 1	C 164		
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 the ceilings were not kept in a clean condition as evidenced by dirty and dusty HVAC grilles and registers. Finding on 02/16/2017: a. Out of the first 10 exhaust and return air grilles examined 8 were completely clogged with dust thus indicating that throughout the facility there is a pattern of the grilles being clogged with dust.	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 there is a failure to maintain the facility free from hazards.	C 166		

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C 166	Continued From page 2 Emergency means of egress/pathways must be kept clear of obstructions and encroachments and not used for storage. In the event of an emergency requiring evacuation from the facility, obstructing or encroaching on the means of egress/pathways could effect occupants of the facility by delaying evacuation. Finding on 02/16/2017: a. Memory Care, Exit Adjacent to Room #412 - There are items stored in the exit path of the vestibule from the designated exit door to exterior of the building. 2. Based on observation the facility is not maintained free from hazards. The building code designated required clearance of 36 inches for electrical equipment must not be encroached upon. Obstructing access to electrical equipment could delay timely operation in an emergency situation. Findings on 02/16/2017: a. Kitchen Mechanical Room - Access to the electrical panels is obstructed by items stored in front of the panels. b. Activity Office - Access to the electrical panels is obstructed by items stored in front of the panels.	C 166		
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	C 189		

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C 189	Continued From page 3 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 and documentation of the fire sprinkler inspection report the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect all occupants of the facility if the equipment is not capable of operating so as to provide its required fire safety function and purpose in the event of a fire in the facility. Findings on 02/16/2017. a. Kitchen Mechanical Room - The entire "dry" fire sprinkler system serving the attic and exterior portions of the facility was completely disabled and therefore would not provide fire suppression in the event of a fire. Examination of the fire sprinkler riser showed the water supply gauge indicated "0" P.S.I. of water pressure. The air supply pressure gauge indicated "0" P.S.I. of air pressure in the system. The control valve allowing water to enter the inlet side of the clapper valve was in the closed position. Examination a report from an annual inspection conducted on 10/29/2016 by a licensed fire sprinkler system contractor showed leaks were discovered in the dry system. Another inspection report by the the same licensed contractor conducted on 02/07/2017 stated the dry fire sprinkler system was not in operation upon their arrival. DHSR surveyors also noted the facility's FACP did not show any "troubles" or "supervisory alarms" on its display and the FACP's status read	C 189		

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C 189	Continued From page 4 "normal". During Interviews with the facility maintance person and the business officer, both stated that there was no fire watch in progress. Also both stated that the provider had not been able to obtain a date from the fire sprinkler contractor to return and repair the system. The local Fire Marshall was notified and he contacted the responding fire station's captain who visited the facility while the DHSR surveyors were on site. The fire department captain approved fire watch procedures for the facility. b. Physical Therapy Room Exterior Porch - One of the two required "dry" fire system sprinkler heads had been removed and replaced with a quarter turn valve. 2. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Findings on 02/16/2017: a. Laundry - There is an approximately 4"x 6" hole in the gypsum board fire resistant rated ceiling. b. Kitchen Mechanical Room - There is a gap at the joint in the fire resistant rated ceiling where the gypsum board joint tape and finish compound has failed. c. Kitchen Mechanical Room - Repair of the ceiling leak is not complete. There are gaps in the	C 189		

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C 189	Continued From page 5 joints in the fire resistant rated ceiling where the gypsum board joint have not been taped and finished. d. Salon - The sprinkler head escutcheon is missing thus leaving a hole in the fire resistant rated ceiling where it is penetrated by the piping for the fire sprinkler head. 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the facility could be effected if doors required to be smoke resistant do not latch and remain closed as required to help limit the spread of smoke or fire to the area of origin. Findings on 02/16/2017: a. Laundry Rooms - The door frame strike plates were taped over so the doors would not latch to remain closed when shut. Note: Tape was removed while surveyor was on site. b. Memory Care, Room #409 - The hardware for the resident room door to the corridor is broken and the door will not latch to remain closed when shut. 4. Based on observation electrical emergency/safety related equipment is not being maintained in safe operating condition. Failure to maintain electrical emergency safety equipment in safe and operable condition could effect occupants of the facility if the equipment did not function when and as required. Finding on 02/16/2017: a. Memory Care Entry/Exit door - The wall mounted directional exit sign is not illuminated on	C 189		

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C 189	Continued From page 6 house current or on battery back up. 5. Med Room - Based on observation the facility did not maintained electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Finding on 02/16/2017: a. The wall mounted emergency light did not operate when tested on battery power.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 there were electrical portable heaters in the facility. Findings on 02/16/2017: a. There was an portable electrical combination fan and heater in the reception area. Note the heater was removed while the surveyor was on site.	C 191		

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C 191	Continued From page 7 b. Room #304 - There was an portable electrical heater in the resident's room.	C 191		
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 there is an absence of exhaust ventilation in spaces required to have exhaust ventilation. Failure to exhaust air from the designated areas could effect the occupants of the facility by not removing odors, fumes or possible air borne contaminates from areas or rooms required to have exhaust ventilation. Finding on 02/162/2017: a. Memory Care - There is no exhaust fan installed in the laundry room to exhaust air to the exterior of the building envelope.	C 199		