STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL044042	A. BUILDING: **01** B. WING _____	**01/11/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HAYWOOD HOUSE	**27 NORTH MAIN STREET CANTON, NC 28716**

(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 Construction Section Biennial Survey by Dennis Harrell on 1-11-2017. Records indicate this facility was originally constructed and licensed as a nursing home. The facility was licensed for the first time as an Adult Care Home on 6-29-2012, (submitted on 5-23-2011). The facility is currently licensed as a 60 Bed Special Care Unit. Therefore the facility was surveyed for conformance with 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 2009 Edition of the North Carolina State Building Code(s), Institutional Occupancy.	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: Based on a review of documents, the most recent Fire Marshal building safety inspection report was dated 12-18-2015. Buildings must be inspected and approved annually as required to ensure all systems can operate properly in an actual emergency.	C 111		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 166		

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C 166	Continued From page 1 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 was no key onsite to allow entry into the front hall Business office and Business office file room to survey for hazards. 2. Based on observation, a drain grate was missing on a 4 inch drain through the sidewalk from the 3rd floor. The missing grate presented a trip and fall hazard. 3. Based on observation there was a hasp and padlock on the outside of the door to the walk-in cooler on the back hall. Latching hardware that can only be operated from one side of the door, such as hasps and padlocks, present the possibility that someone could be trapped in the cooler. 4. Based on observation, a sink had been removed in the 3rd floor storage behind the nurse station. The drain had been sealed with foam. Drains that are not sealed properly could allow noxious, combustible odors and possibly harmful bacteria to enter the facility. 5. Based on observation, the waste traps had been allowed to become dry in the toilet and sink in the bathroom near the riser room. Dry waste traps allow noxious, combustible odors and possibly harmful bacteria to enter the facility.	C 166		

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C 166	Continued From page 2 6. Based on observation, part of the latch assembly was missing on the 1 hour doors to the laundry. The missing hardware exposed sharp edges.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 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 a review of documents, the records available onsite included no description of what the rehearsal involved.	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)	C 189		

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C 189	Continued From page 3 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. Fire rated ceiling tiles damaged or missing in areas throughout the 3 story portion of the facility. b. Fire rated suspended ceiling grid and tiles missing in storage closet on the back hall. c. Holes in the wall in the back building men's restroom, d. Hole in the ceiling of the linen closet near room 105 on the front hall, e. Hole in the ceiling of the med room, f. Hole in the wall of the copy room, g. Holes in the wall in the ingestible room, h. Holes in the wall in the employee lounge. 2. Based on observation, many 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. Both sets of smoke barrier doors on the front hall not latching properly when activated by the fire alarm system. One door latches to the other door but that door fails to latch to the frame. b. The smoke barrier doors near the elevator do not latch when activated by the fire alarm system. c. Hole through the door to the activity room.	C 189		

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C 189	Continued From page 4 d. Latchset removed from door to riser room. e. Latchset removed from door to Business office on back hall. 3. Based on observation, the battery powered emergency light in the 2nd floor stairway 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. 4. Based on observation, the exit doors to the stairway on the 2nd and 3rd floors are not marked with an illuminated exit sign. The exit signs provided are in the center of the corridor more than 10 feet away. 5. Based on observation, the cover plate was missing on an electrical junction box in the 2nd floor linen storage.	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: Based on observation the facility failed to adhere	C 191		

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C 191	Continued From page 5 to the prohibition of portable electric heaters. Portable electric heaters are a potential fire hazard and as such could effect all occupants of the facility. Finding includes: There was a portable electric heater in use in the elevator room.	C 191		