STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL036016	A. BUILDING: **01** B. WING _____	**03/30/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARILLON ASSISTED LIVING OF CRAMER MC	**500 CRAMER MOUNTAIN ROAD CRAMERTON, NC 28032**

(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 a Construction Section Biennial Survey by Ed Miller and Frank Strickland, conducted on March 30, 2017. Records indicates that this facility was submitted on June 30, 1997, for 96 beds. There was an addition of 32 beds early in 2002 bringing the total capacity to the current 128 beds with 24 of those in a Special Care Unit. Therefore we are requiring that this facility meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds and the 1996 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I). Deficiencies were cited that require a Plan of Correction.	C 000		
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and This Rule is not met as evidenced by: 1. Based on observation, the building did not meet the requirements for outside entrance and exits. This would affect residents, staff and visitors by requiring more time to exit the building during an emergency.	C 153		

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C 153	Continued From page 1 Findings on March 30, 2017: a. Media Room - the exterior exit door has a dead bolt with inside thumb turn release in addition to a lockset door handle requiring multiple hand motions to operate the door.	C 153		
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 building mechanical systems were not maintained in a clean manner. This would affect all residents by exposing them to dust and dirt. Findings on March 30, 2017: a. Pantry - the return HVAC grille and its radiation damper have an excessive accumulation of dust/lint. b. Kitchen Housekeeping - the return HVAC grille and its radiation damper have an excessive accumulation of dust/lint. c. C-Hall Housekeeping - the return HVAC grille and its radiation damper have an excessive accumulation of dust/lint.	C 164		
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 2 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, because the portable medical oxygen cylinders were not being properly handled/stored. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on March 30, 2017: a. Oxygen Storage - three portable medical oxygen cylinders were stored standing up in beverage crates not secured to the structure.	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 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 interview with Regional Maintenance Director, the Building was not maintained in a safe and operating condition;	C 189		

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C 189	Continued From page 3 because maintenance was not performed in a timely manner leaving the facility without proper fire sprinkler protection. This would affect all residents, staff and visitors, by not providing the protection fire sprinklers provide. Findings on March 30, 2017: a. Examination of the fire sprinkler riser revealed the accelerator had been by-passed by Sprinkler personal. Sprinkler Mechanics arrived on site to fix accelerator and replace a defective pipe section. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict smoke. This could affect all residents, staff and visitors by not containing the smoke of the fire in the compartment of origin. Findings on March 23, 2017: a. Smoke Barrier on D-Hall - the left leaf, of the double-egress cross-corridor doors, was missing its roller latch to keep the door closed. 3. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff and visitors if they could not promptly find their way to an exit during an emergency. Findings on March 30, 2017: a. Corridor near Central Dining - the wall-mounted self-contained emergency light did not illuminate on backup power when tested. Deficiency corrected before Construction Surveyors departed the site. b. Corridor near Bedroom D4 - the wall-mounted self-contained emergency light did not illuminate on backup power when tested. Deficiency corrected before Construction	C 189		

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C 189	Continued From page 4 Surveyors departed the site. 4. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, all to fire/smoke if not contained in Room or compartment of origin Findings on March 30, 2017: a. Residents Care Coordinator - there was a gap around three cables not firestopped as they penetrate the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed the site. b. B-Hall near Bedroom B14 - the exit sign did not completely cover the hole penetrating the fire-resistance-rated ceiling assembly, 5. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance and documentation required to ensure a properly working system. This could affect residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on March 30, 2017: a. Kitchen -since the semi-annual certification of the commercial kitchen hood's fire suppression system in January 2017, there has been no documentation of the monthly inspections.	C 189		