

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL067013	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/21/2017
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

LIGHT HOUSE VILLAGE

**182 VILLAGE DRIVE
JACKSONVILLE, NC 28546**

(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 3-21-2017. Records indicate this facility was first licensed as a Home for the Aged on 1-21-1980, and currently serves 80 residents. Therefore, the facility must meet the 1977 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes and, the 1978 (w/revisions) North Carolina State Building Code for Group I - Unrestrained Occupancy.	C 000		
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: 1. Based on review of documents, fire drill rehearsals are not being done regularly with at least one per shift each quarter. Failure to rehearse the fire plan could lead to confusion and delay in an actual emergency. Findings include: a. In the 2nd quarter of last year, there was no rehearsal done during the 2nd shift.	C 185	Fire safety rehearsals will be conducted quarterly on each shift and documented properly in accordance with section .0300-10A NCAC	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

Toryana Baldwin

Administrator

4-14-17

OVD021

If continuation sheet 1 of 4

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NAME OF PROVIDER OR SUPPLIER LIGHT HOUSE VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 182 VILLAGE DRIVE JACKSONVILLE, NC 28546		
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C 185	Continued From page 1 b. In the 3rd quarter of last year, there was no rehearsal done during the 3rd shift. c. In the 4th quarter of last year, there were no rehearsals done at all. 2. Based on a review of documents, the records available onsite included no description of what the rehearsal involved. 3. Based on a review of documents, the records available onsite did not include the shift and some of the times listed did not indicate whether AM or PM.	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, 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. One of the fire doors near room 27 did not latch when closed.	C 189	(a) Fire door scheduled to receive maintenance repair on and/or by 4-28-17	

03/21/2017

(a-b) Battery powered emergency lights replaced and now in working order as of 4-12-17

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C 189	Continued From page 3 Exit signs lacking battery back-up include at least the following areas: a. Corridor near activity room, b. Kitchen, c. Dining room, d. Corridor near room 32. 4. 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. Unsealed penetrations (2) in the ceiling of the closet off the Administrator's office, b. Unsealed penetration in the ceiling of the closet off bedroom 41, c. Hole in the wall in the shower room across from room 37, d. Hole in wall of Activity room, e. Exit sign in corridor near room 32 not tightly mounted to ceiling, f. Penetrations in ceiling of Telecom room sealed with unrated foam, 5. Based on observation, one of the blades was badly bent on a ceiling fan in the front lobby. The bent blade was causing the fan to wobble significantly which could cause it to fall. 6. Based on observation, the battery was weak in a battery only powered smoke detector in room 41.	C 189	(a-d) Exit signs repaired and illuminating as of 4-12-17 (a-b) Fire sealant put in area(s) 4-12-17 (c) Hole in shower room wall scheduled for repair on and/or by 4-28-17 (d) Hole in wall of activity repaired 4-12-17 (e) Exit sign tightened and mounted properly 4-12-17 (f) Scheduled repair for proper sealant in telecom room for and/or by 4-28-17 Ceiling fan put out of use and scheduled for repair maintenance on and/or by 4-28-17 Battery replaced in room 41 smoke detector as of 4-12-17	