STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL075001	A. BUILDING: **01** B. WING _____	**05/17/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIDGE REST	**354 WOODLAND DRIVE COLUMBUS, NC 28722**

(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 5-17-2017. Records indicate that this facility was first licensed for 12 beds on 8-1-1979. An old fire inspection report provided by the Owner indicates that the oldest portion of the building was in operation as early as 1968 as Ridgecrest. There were 5 bedrooms added to the building in 2006 but the capacity stayed at 12 beds. Based on this information, the older portion of the facility was surveyed using the1967 NC Building Code, 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 newer portion of the building was reviewed using the 2002 NC State Building Code, the 2000 rules for Adult Care Homes of Seven or More Beds, and the applicable portions of the current rules for Adult Care Homes of Seven or More Beds. Note; The newer portion of the building is protected with an NFPA 13R fire sprinkler system.	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 a review of documents, the most recent fire alarm inspection report was dated 4-25-2016. Fire alarm systems must be	C 111		

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C 111	Continued From page 1 inspected and approved annually as required to ensure all systems can operate properly in an actual fire. 2. Based on a review of documents, the most recent Sanitation inspection for the building was dated 4-15-2016. Buildings must be inspected and approved annually as required.	C 111		
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	C 189		

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C 189	Continued From page 2 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 facility failed to be maintained in a safe condition because a battery powered emergency light would not work when tested. Battery powered emergency lights must work properly for at least 90 minutes. Finding includes: The battery powered emergency light in the basement would not work when tested. Note; This deficiency was corrected during the survey. 2. Based on observation, corridor doors are prevented from 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 smoke barrier doors would not automatically latch when closed. Note; This deficiency was corrected during the survey. b. The latchbolt was missing on the door to the pantry. Note; This deficiency was corrected during the survey.	C 189		