

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

8899

ED3Y21

If continuation sheet 1 of 3

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL010005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/08/2017
NAME OF PROVIDER OR SUPPLIER CARILLON ASSISTED LIVING OF SOUTHPORT		STREET ADDRESS, CITY, STATE, ZIP CODE 1125 E LEONARD STREET SOUTHPORT, NC 28461		
(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 189	Continued From page 1	C 189		
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 a fire safety system is not maintained in a safe condition. Failure to maintain fire safety systems in a safe condition could effect occupants of the facility if the system did not provide the required fire resistant rated protection. Finding on 03/08/2017: a. Building Systems Closet Across from Marketing Office - Sleeves for data cabling that penetrate the ceiling were sealed with an expandable foam type material which is not an approved fire resistant rated product. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors that open to corridors are required to close completely and latch in the event of a fire. The occupants in the smoke compartment could be effected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Finding on 03/08/2017: a. Laundry - The latching type hardware is	C 189	C189 1a) All sleeves in Building Systems room have foam removed and steel wool with fire caulking have been installed 2a) A new latch has been installed to laundry Room Door	

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C 189	Continued From page 2 missing from the laundry room door that opens into the service corridor which serves as a path of egress. 3. Based on observation the facility did not maintain 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 03/08/2016: a. Kitchen - The wall mounted emergency lights did not illuminate when tested on battery power.	C 189	C189 3a) New Emergency light has been installed and w All work has been completed as written and verified by Corporate Maint Director 	