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FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL060014	A. BUILDING: 01 B. WING _____	03/31/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HUNTER VILLAGE	111 S CHURCH STREET HUNTERSVILLE, NC 28070

(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 Construction Section Biennial Survey report by Frank Strickland and Ed Miller on 03/31/2017: This Facility was licensed for licensure on 02/25/1993 for Sixty-Eight (68) Residents. Therefore, this facility must meet the 1992 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1991 North Carolina State Building Code (1993 Revision), Section 409.1 Group I- Unrestrained Occupancy. Deficiencies have been cited and a Plan of Correction is required.	C 000	Kick plates were installed on the doors referenced. The maintance director will monitor the doors and add kick plates to new admissions that have a wheel chair. (See Attachment A)	4/25/17 ongoing
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, this facility has not maintained the wood finishes of the interior doors in good repair. Findings on 03/31/2017: The following locations of interior doors are damaged due to wheel-chair interaction: (a) Room A9 (b) Room A10 (c) Room B5	C 164		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Janet B. Will, administrator 5/2/2017

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C 164	Continued From page 1 (d) Room D2	C 164	The juice line was taken care of by the maintance director on 4-6-17. He will make sure the proper chalking is put around any areas like this as the facility has things done. (See attatchment B)	4-6-17 ongoing
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, this facility has failed to provide fire protection in penetrations through the fire-rated roof/ceiling assemblies. Findings on 03/31/2017: The juice chiller refrigerant line that penetrates the ceiling is not fire protected located in the Kitchen. 2-Based on observation, this facility has failed to maintain in a safe and operating condition the emergency lighting. This would affect all residents, staff and visitors if the egress pathways were not illuminated during a power outage. Findings on 03/31/2017: The following locations had emergency corridor lights that did not illuminate when tested in the emergency mode: (a) Small Dining-B Hall (b) Living Room-C Hall	C 189	The emergency light battery's were repaired/ replaced on 4/6/17. These will be checked on monthly maintance checks in all the facility. Records will be kept of checks in the maintance log located in Nurses office (See attatchment C)	4-6-17 ongoing

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C 189	Continued From page 2 3-Based on observation, this facility has not maintained the plumbing fixtures in Bathrooms in good repair. Findings on 03/31/2017: The following plumbing fixtures are in disrepair in Bathroom C7: (a) The sink is not secured to the supporting wall. (b) The faucet is not secured to the sink and is leaking.	C 189	The sink was repaired on 4/3/17 The maintance director will continue to moniter sinks to make sure they stay in good repair. (See attachment D)	4-3-17 ongoing
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: 1-Based on observation, this facility has failed to prevent the use of portable electric heaters in offices and spaces. Findings on 03/31/2017: There is a portable electric heater in the Office Manager's Office.	C 191	Heater was removed from the business office managers the day the surgery was done even though the business office is not a common area for residents and at no time was a resident or staff in danger.	
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT	C 199		

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C 199	Continued From page 3 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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, this facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. Findings on 03/31/2017: The mechanical exhaust fans are not exhausting interior air in the following locations: (a) Common Bath-C Hall (b) Women Bathroom @ Nurse's Station-C Hall (c) Main Laundry-D Hall	C 199	The vans were ordered by Blu Sky on 4/6/17 to be installed as soon as they come in. We called to check on status on 5/1/17 they are still on order. Monthly checks of exhaust vans will be done by maintenance director and log kept in maint. Book in admin. office	5-19-17