STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034068	A. BUILDING: **01** B. WING _____	**07/13/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MEMORY CARE OF THE TRIAD	**413 NORTH MAIN STREET KERNERSVILLE, NC 27284**

(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 on 07/13/2017: This facility was first licensed as a Home for the Aged serving 59 residents on 08/01/1986. However, a tax document provided by the staff indicates the facility was built and operatiing in 1965. The facility is currently licensed for 42 Special Care residents. Based on this information, this facility is required to meet the 2005 Rules for the Licensing of Adult Care Homes, and, the 1958 NC State Building Code, Institutional Unrestrained. Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1-Based on observations, this facility does not meet the Building Code requirements for Special Locking Arrangements (magnetic locks) in effect at the time of renovation or alteration. Findings on 07/13/2017: a. The required emergency release switch located at each magnetically locked exit door was of the locking type, with keyed switches. The med tech was the only staff member carrying a release switch key and the other staff that were interviewed carried no release switch keys. This is not in conformance with the Code requirement that all staff who are responsible for the evacuation of the occupants must carry an emergency release key at all times when on duty. b. No wiring diagram of the Special Locking System components has been provided mounted adjacent to the fire alarm control panel. c. No on/off centrally controlled emergency release switch was identified at the time of survey.	C 101		
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 observation, the facility has failed to maintain current safety inspection reports for	C 111		

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C 111	Continued From page 2 review. Findings on 07/13/2017: The facility does not have current Fire Inspection and Fire Alarm Testing reports on site for review.	C 111		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained the hand grips in a safe condition. This could result in a fall if the hand grips do not support a person's weight. Findings on 07/13/2017: The toilet sidewall hand grips are not at the following locations: (a) Back Hall Shower Room (b) Room #1 Bathroom (c) Shower Room #2	C 133		
C 136	Bathrooms-Must Be Mechanically Ventilated SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (11) Toilets and baths shall be well lighted and mechanically ventilated at two cubic feet per	C 136		

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C 136	Continued From page 3 minute. The mechanical ventilation requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation; 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. This could affect residents and staff by subjecting them to house-keeping odors. Findings on 07/17/2017: The mechanical exhaust fans are not exhausting interior air in the following locations: (a) Front Hall Housekeeping Closet (b) Shower Room #2	C 136		
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, the facility has not maintained in a safe manner by improper storage of oxygen cyclinders. This could affect all residents and staff by potentially exposing them to hazards for a ruptured ruptured cyclinder. Findings on 07/13/2017:	C 189		

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C 189	Continued From page 4 There are 4 oxygen bottles in Room 15 not in racks. 2-Based on observation, this facility has failed to provide fire protection in all electrical ceiling penetrations through the fire rated wall assemblies. Findings on 07/13/2017: There are electrical and HVAC piping through the masonry walls that are not fire protected located in the Main Mechanical Room. 3-Based on observations, the facility has not maintained the plumbing drainage in bathing areas in a safe manner by not complying with the North Carolina Plumbing Code. Findings on 07/13/2017: There is not a protective floor drain cover in the roll-in shower located in the Back Hall Shower Room. 4-Based on observations, the facility has not maintained the plumbing fixtures in the Bathrooms in a safe manner by not complying with the North Carolina Plumbing Code. Findings on 07/13/2017: There are loose toilet seats at the following locations: (a) Back Hall Shower Room (b) Room 1	C 189		