STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL041010	A. BUILDING: **01** B. WING _____	**08/17/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PIEDMONT CHRISTIAN HOME	**1510 DEEP RIVER ROAD HIGH POINT, NC 27265**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay and Ed Miller conducted on August 17, 2017. Records indicate this facility was first licensed on April 1, 1965. The facility is currently licensed for 93 Beds including a 24 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1977 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1958 Edition of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies were cited that require a Plan of Correction.	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 observation, the facility did not meet the code requirements in effect at the time of renovation or alteration. Review of records revealed that the facility had converted 24 beds of one wing to a Special Care Unit in 2014. Findings on August 17, 2017: a. MCU - the bedroom closets do not have any form of automatic fire detection or sprinkler protection. b. MCU - two closets were added at the nurses' station during renovations which occurred when converting to a special care unit. These closets were not provided with automatic fire detection or sprinkler protection. 2. Based on observation, the facility did not provide proper identification and direction for all required exits per the building code requirements in effect at the time of construction or renovation. Findings on August 17, 2017: a. 300 Hall - the side exit into the courtyard by the nurses' station did not have a lighted exit sign. The exit is not visible from the corridor and there is not a directional exit sign at the corridor junction.	C 101		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe	C 160		

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C 160	Continued From page 2 condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside grounds were not maintained in a clean and safe condition. Findings on August 17, 2017: a. 300 Hall exit - the soffit at the exit door is deteriorating and there is a small hole in the plywood panel that will allow pests to enter the facility.	C 160		
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, the facility did not maintain the walls clean and in good repair. Findings on August 17, 2017: a. Exterior Riser Room - the bottom 8" +/- of the exterior wall is black with mold. 2. Based on observation, the facility did not maintain the resident bathrooms free of unpleasant odors.	C 164		

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C 164	Continued From page 3 Findings on August 17, 2017: a. Bath off of Room 203 - had a strong, unpleasant odor.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the hand grips were not maintained in a manner that insures the safety of the residents to prevent them from falling. Findings on August 17, 2017: a. Restroom by Room 405 - the hand grip for the toilet was loose. 2. Observations revealed that the electrical outlets were not maintained in a safe manner to prevent injury to the residents. Findings on August 17, 2017: a. MCU- left bathroom by nurses' station - the light fixture had a nonGFCI outlet in the fixture. b. Receptionist's Office - several power chords were pigtailed together.	C 166		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

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C 189	Continued From page 4 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 there is a failure to maintain the building's fire safety equipment systems in a safe condition. Holes or gaps at penetrations in the fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on August 17, 2017: a. Exterior Riser Room - the two hanger rods are pulling away from the ceiling leaving damaging the fire resistant ceiling rating. b. Exterior Riser Room - there is an electrical junction box in the fire resistant ceiling that is open on all sides. c. 400 Hall Biohazard Room - there is a hole at the sprinkler head. d. 200 Hall Living Area - the escutcheon plates for four (4) heads were damaged or had fallen off. e. 200 Hall Biohazard Room - there were several open penetrations at the conduit penetrating the building exterior wall in the storage room. f. 100 Hall Utility Room - there were openings where the electrical panel conduit penetrated the ceiling. g. 100 Hall Utility Room - some of the data/phone conduits had been sealed with foam caulking. h. 100 Hall near Room 112 - two fire sprinkler	C 189		

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C 189	Continued From page 5 heads have dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. i. Boiler Room - ceiling penetrations occurred at the plumbing pipe. j. Dining Room - a fire sprinkler head escutcheon has dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe near the dining room entry door. 2. 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. Findings on August 17, 2017: a. Inner courtyard - the exit light/sign on the inner courtyard gate did not appear to be lit nor did it light on the battery test. b. The exit light/sign at the courtyard door did not work. 3. Based on observation electrical emergency/safety related equipment is not being maintained in safe operating condition. Failure to maintain electrical emergency safety equipment in safe and operable condition could effect occupants of the facility if the equipment did not function when and as required. Findings on August 17, 2017: a. 400 Hall Med Room - the outlets on either side of the sink indicate on a tester that they are GFCI outlets, but did not trip with the tester. 4. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke	C 189		

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C 189	Continued From page 6 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. Findings on August 17, 2017: a. Room 107 - the corridor door does not latch when closed. 5. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. Failure to maintain fire alarm system devices and equipment in a safe and operable condition could effect all occupants of the facility if the equipment did not function when and as required. Findings on August 17, 2017: a. Fire alarm head #18 in the main foyer did not set off the fire alarm when sprayed with canned smoke.	C 189		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.	C 195		

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C 195	Continued From page 7 This Rule is not met as evidenced by: 1. Observations revealed that the hot water temperature at all fixtures used by residents was not maintained at a minimum of 100 degress F without exceeding 116 degrees F. Findings on August 17, 2017: a. 300 Halls - the mixing valve ont eh water heater for the 300 hall was broken. A replacement was ordered on August 11, 2017. At the time of this survey, the water temperature in the 300 hall was 90 degrees F.	C 195		