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
	HAL058010	A. BUILDING: 01 B. WING _____	06/08/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VINTAGE INN RETIREMENT COMMUNITY	826 EAST BOULEVARD HWY 17 N BYPASS WILLIAMSTON, NC 27892

(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 a Construction Section Biennial Survey by Billy S. Bryant and Ed Miller conducted on 06/08/2017. Records indicate this facility was first licensed on 09/25/2017. The facility is currently licensed for 122 Beds including a 50 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 and applicable portions of the 1978 (Revision 10) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1987 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	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. The facility did not have current safety inspection reports maintained in the home and available for review. Finding on 06/08/2017: a. A current fire marshal's inspection report was not available for review at the facility at the time of the survey. b. The kitchen exhaust hood fire suppression system inspection tag indicated the system was last inspected on 01/16/2016. Exhaust hood fire	C 111 A B	Fire Marshall was called inspection was done (Copy of inspection with POC) ansul system has to be updated and is schedule	6/30/17 7/14/17

Division of Health Service Regulation

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

Mitchell Moran — Director of Maintenance — 6/30/17

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C 111	Continued From page 1 suppression systems are required to be inspected every 6 months by a certified technician.	C 111		
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 condition; This Rule is not met as evidenced by: 1. Based on observation the outside grounds of the facility is not maintained in a clean condition. Finding on 06/08/2017: a. There is vegetation sprouting from the roof rain gutters.	C 160 A	gutters was cleaned out and put on maintenance schedule to check and clean	6/15/17
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 ceilings are not maintained clean and in good repair.	C 164		

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C 164	Continued From page 2 Findings on 06/08/2017: a. Administrator's Office - The ceiling paint is peeling from the ceiling surface. b. There is a pattern of HVAC return air and exhaust fan grilles and the radiation dampers that need cleaning. Approximately 1/2 of the HVAC return air and exhaust fan grilles and the radiation dampers above the grilles in the facility's ceiling were clogged with dust. 2. Based on observation the floors are not maintained clean and in good repair. Finding on 06/08/2017: a. Kitchen - There is trash and a build up of dirt on the floor under the prep table immediately adjacent to the ice machine.	C 164 A B A	Ceiling was repaired and painted HVAC return air and exhaust fan was cleaned and put on Schedule to be cleaned Trash and build up has been cleaned and will be keeped cleaned daily	6/21/17 6/29/17 6/16/17
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. Based on observation the facility is not maintained free from hazards. Findings on 06/08/2017: a. S.C.U., Janitor's Closet - Access to the electrical panels is obstructed by disposable diapers stored in front of the panels.	C 166 A	janitor's closet cleaned out and nothing will be stored in front panels	6/17/17

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C 166	Continued From page 3 b. Kitchen, Main Electrical Room - The electrical room is being used for kitchen supplies storage and access to the electrical panels is obstructed by items stored in front of the panels. 2. Based on observation the facility was not maintained free from hazards due to oxygen bottles that are stored without any means of restraint to prevent them from falling or being knocked over. Oxygen bottles that are improperly stored may present a danger to the occupants of the facility. Finding on 06/08/2017: a. Oxygen Storage Room - Oxygen cylinders were stored standing upright and without any means of restraint to prevent them from falling over. 3. Based on observation the facility was not maintained free from hazards. Finding on 06/08/2017: a. S.C.U. Spa Adjacent to Room #44 - The fluorescent light fixture lens is almost cracked in two and is in danger of completely detaching from the fixture.	C 166 B A A	Electrical room has had all obstructions move out from front of panels Oxygen cylinders has been put in racks Light Fixture replaced	6/17/17 6/16/17 6/17/16
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	C 189		

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C 189	Continued From page 4 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 facility's fire safety systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Findings on 06/08/2017: a. S.C.U., Laundry - There are gaps around the PVC piping where it penetrates the fire resistant rated ceiling. b. S.C.U., Janitor's Closet- The drywall tape and mud have deteriorated at a joint creating a gap in the fire resistant rated ceiling. c. Linen Closet at Entrance to the S.C.U. - The drywall tape and mud have deteriorated at a joint creating a gap in the fire resistant rated ceiling. In addition there are gaps around the electrical conduits where they penetrate the fire resistant rated ceiling. d. Main Mechanical Room - There are gaps around the PVC piping for the water heaters where they penetrate the fire resistant rated ceiling. e. S.C.U. Day Room - Both fire sprinkler head escutcheons have dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. f. S.C.U., Room #62 - The fire sprinkler head	C 189 A B-C D	filled gaps with fire barrier sealant sheetrock joints was repaired and retaped filled gaps with fire barrier sealant	6/26/17 6/27/17 6/26/17

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C 189	Continued From page 5 escutcheon in the living area has dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. g. S.C.U. Living Room - The fire sprinkler head escutcheon in the living area has dropped down creating a gap in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. 2. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner due to holes in the fire resistant rated walls. 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 06/08/2017: a. Main Hall Utility Room - An approximately 4 square foot section of drywall has been removed from the section of the fire resistant rated wall that is shared with the corridor. 3. 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. 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. Findings on 06/08/2017: a. S.C.U., Room #41 - The door hardware is is loose so that it will not operate and latch to keep the door shut when the door is closed. b. S.C.U., Cross Corridor Doors - The doors adjacent to the dining room did not completely close and latch when released from their	C 189 E, F, G A A B	all escutcheons was pushed back up to the ceiling Drywall was replaced door hardware tight up door latches now Door adjusted closes and latches	6/26/17 6/29/17 6/27/17 6/27/17

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C 189	Continued From page 6 magnetic hold open devices. c. S.C.U. Dining room - When the door to the corridor is shut there is an approximately ¼" gap between the door and the door frame stop that would prevent the door from resisting the passage of smoke.	C 189 C	door was repaired to close up 1/4 gap	6/20/17
	d. Cross Corridor Doors, Adjacent to Room #10 - The doors did not completely close and latch when released from their magnetic hold open devices. Note: Repaired while the surveyor was on site.	D	Repaired day of survey	6/8/17
	e. Room # 32 - The door hits the door frame preventing it from completely closing and latching when shut.	E	Door adjusted closes and latches	6/26/17
	4. 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. Finding on 06/08/2017: a. Room # 37 - The ceiling smoke heat detector was detached from its mounting base and was hanging by its wiring. Note: Repaired while the surveyor was on site.	A	Repaired day of survey	6/8/17
	5. 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 or if illuminated directional exit signs could not be seen.			

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C 189	Continued From page 7 Findings on 06/08/2017: a. Corridor at Room #26 - When tested on battery power the directional exit sign did not illuminate. b. Fire Alarm Panel - When tested on battery power the wall mounted emergency light above the F.A. panel did not illuminate. 6. Based on observation there is a failure to install and maintain required plumbing safety devices or equipment. Failure to maintain or install plumbing safety devices or equipment could cause the domestic water supply to become contaminated. Finding on 06/08/2017: a. S.C.U., Room #62 - The hand held shower head reaches the bottom of the tub but a vacuum breaker is not installed for the shower head. b. Kitchen - There is no gap between the ice machine drain pipe and the floor drain. The drain pipe for the ice machine is plumbed down into the floor drain.	C 189 A, B A	Battery will be replaced or device will be replaced replaced hand held shower so it will not reach the bottom of tub	7/14/17 6/23/17
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	C 191		

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C 191	Continued From page 8 facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. The facility did not comply with portable electrical heaters being prohibited. Finding on 06/08/2017: a. Room #27 - There was a portable electrical heater in use by the resident in the room.	C 191 A	portable heater was removed	6/19/17
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 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 the facility failed to provide the required exhaust ventilation equipment in spaces required to be mechanically exhausted by rule. Finding on 06/08/2017 a. In 7 out of the first 12 resident bathrooms and	C 199		

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C 199	Continued From page 9 3 out of 4 of the Spas surveyed the exhaust fans are not working indicating a pattern of exhaust fans that do not operate.	C 199 A	Fan have been checked and have started repairing or replace them	7/31/17

Williamston Fire/Rescue
Fire Prevention Bureau
901 Washington St.
Williamston, N.C. 27892

Inspection Report

Date 06/20/2017 Type Institutional

Occupancy Name VINTAGE INN Phone # 792-8311

Address 826 EAST BLVD

Business Owner VICTORIAN SENIOR CARE Phone # 877-698-2463

Address PO BOX 814 City RANDLEMAN State NC Zipcode 27317

Building Owner BECKY DYMECK (ADMINISTRATOR) Phone #

Address City WILLIAMSTON State NC Zipcode 27892

Keyholder KAREN Phone # 799-1076

Keyholder STACEY MARTIN Phone # **Knox Box** ☐

This occupancy has been inspected pursuant to the North Carolina State Fire Code. As a result of this inspection, the following conditions or violations have been found:

VIOLATION	KITCHEN HOOD SUPPRESSION SYSTEM INSPECTION PAST DUE
CORRECTION	DUE A SIX MONTH INSPECTION INSTALL NEW TANK AND INSPECT
VIOLATION	SPRINKLER HEADS IN KITCHEN CORRODED OR GREASE LADEN
CORRECTION	REPLACE SPRINKLER HEADS AS RECOMMENDED IN SPRINKLER REPORT
VIOLATION	SPARE SPRINKLER HEAD BOX ON FLOOR
CORRECTION	REMOUNT CABINET BACK ON WALL IN SPRINKLE ROOM
VIOLATION	STORAGE HEIGHT IN LAUNDRY CLOSET
CORRECTION	18 INCH STORAGE FROM SPRINKLER HEADS
VIOLATION	CLOTHES DRYERS NEED TO BE CLEANED FROM LINT ACCUMULATION
CORRECTION	CLEAN THEM ON A ANNUAL OR MORE FREQUENT BASIS IF NEEDED
VIOLATION	STORAGE BUILDING NEEDS ORGANIZATION AND OR CLEANED OUT
CORRECTION	CLEAN OR ORGANIZE TO MAINTAIN A CLEAR WALKING AREA

You are required to have these conditions or violations corrected within _____ days. Please notify the Fire Prevention Bureau in writing upon completion so the files on this matter may be closed.

STACEY PIPPIN
Inspector

Occupant

WILLIAMSTON FIRE/RESCUE DEPARTMENT
FIRE PREVENTION BUREAU
P.O. Box 602, Williamston, NC 27892

Type **Institutional**

PERMIT TO OPERATE

Date **06/20/2017**

Permit is hereby granted to **VINTAGE INN**
(Business Name)

located at **826 EAST BLVD** for the following
(Business Location)

activities (list each functional):

ASSISTED LIVING CENTER FOR MORE THAN 16

Pursuant to the provision of the North Carolina State Fire Prevention Code and Williamston Town Ordinance, any violation of these regulations may be grounds for revocation of this permit.

This permit does not take the place of any license required by law and is not transferable. Any change in the use or occupancy of premises shall require a new permit.

Approved By: **STACEY PIPPIN** Title: **Fire Inspector II**

THIS PERMIT MUST AT ALL TIMES BE POSTED ON THE PREMISES MENTIONED ABOVE