

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL023042	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 08/03/2017
NAME OF PROVIDER OR SUPPLIER SUMMIT PLACE OF KINGS MOUNTAIN		STREET ADDRESS, CITY, STATE, ZIP CODE 1001 PHIFER ROAD KINGS MOUNTAIN, NC 28086		
(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 08/03/2017: Records indicate this facility was first licensed on 02/04/1998. An addition was added in 2006. The facility is currently licensed for sixty-five residents. Based on this information, we are requiring that this facility to meet the 1996 "Homes for the Aged and Disabled - Minimum Standards and Regulations", the 1996 Edition of the North Carolina State Building Code; Institutional Occupancy, the 2002 Edition of the North Carolina State Building Code; Institutional Occupancy, - Group I-2 and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds Deficiencies have been cited and a Plan of Correction required.	C 000		
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 observations, this facility has failed to maintain the exterior finishes of the exterior doors. Findings on 08/02/2017: The exterior metal doors and supporting frames have peeling paint that are located in the 200	C 160	Exterior metal doors and frames were painted (200 hall corridor) – Maintenance will continue to monitor and ensure the facilities premises are well maintained. See attached photo August 23, 2017	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Jena Christman

TITLE

Executive Dir

(X6) DATE

8/24/17

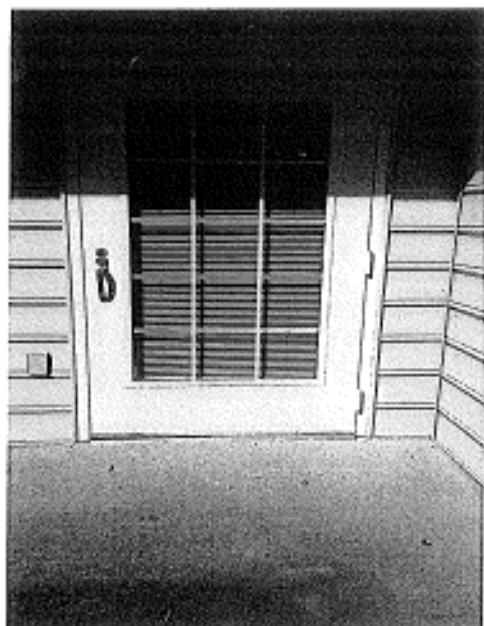
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C 160	Continued From page 1 HALL. 2-Based on observations, this facility has failed to maintain the exterior gates in the Courtyards. Findings on 08/02/2017: The wooden exit gate that is located in the Memory Care Courtyard, drags on the sidewalk and is difficult to open in the event of an emergency for evacuation.	C 160	The wooden gate located in Memory Care courtyard was repaired- Maintenance Director shaved off bottom to allow gate to open more easily. See attached photo August 23, 2017	
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 observations, this facility has failed to maintain the sprinkler head installation in the ceilings throughout the facility. Findings on 08/02/2017: The locations have openings in the ceilings adjacent to sprinkler head escutcheons due to service and repair: (a) Room 201 (b) The entire exit corridor in the 200 HALL. 2-Based on observation, this facility has failed to provide fire protection in all electrical ceiling	C 189	Maintenance Director Fire caulked sprinkler head escutcheons (room 201 and entire exit corridor on the 200 hall) See attached photo August 7, 2017	

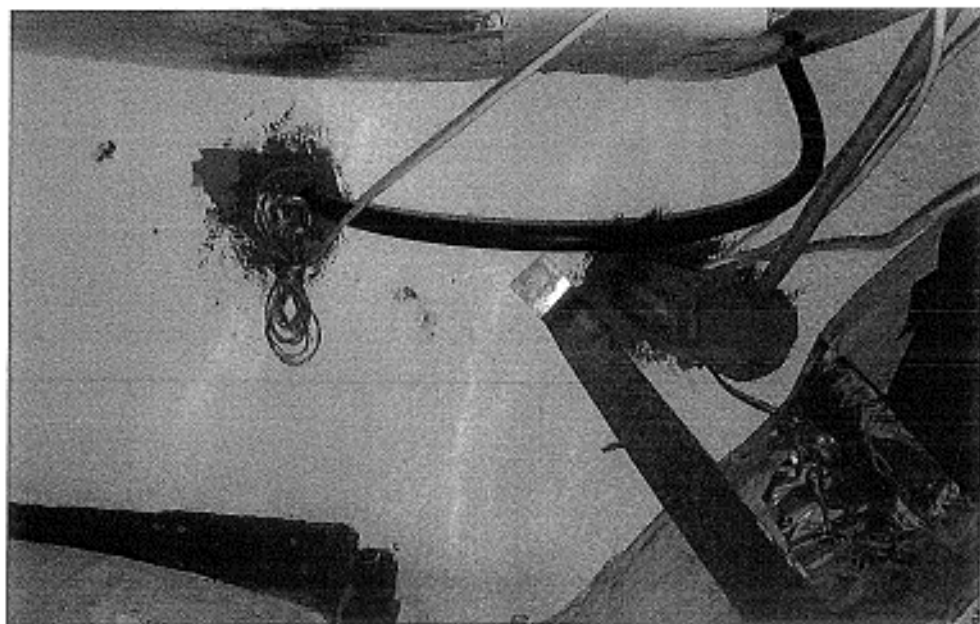
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C 189	Continued From page 2 penetrations through the fire rated roof/ceiling assemblies. Findings on 08/02/2017: There are 3-2" electrical conduits that are penetrating the ceiling in the Main Electrical Room that have incomplete fire-protection where the wiring goes up into the attic. 3-Based on observation, the facility has not maintained the one-hour roof/ceiling assembly construction due to water migration that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin. Findings on 08/02/2017: The ceiling sheet-rock is damaged due to water migration that is located in the Main Sprinkler Riser Room located above the sprinkler riser. 4-Based on observation, the facility has not maintained the one-hour roof/ceiling assembly construction that has invalidated its integrity. Findings on 11/18/2015: There is an opening in the ceiling construction that is adjacent to the emergency corridor light outside Room 323.	C 189	Maintenance fire caulked penetrations in ceiling in Main Electrical Room. See attached photo August 7, 2017 Ceiling sheet rock was repaired in Main Sprinkler Riser Room See attached photo August 7, 2017 Maintenance Director repaired and fire caulked ceiling around emergency light located in shower room- adjacent to room 323. See attached photo August 19, 2017		

2 exterior doors

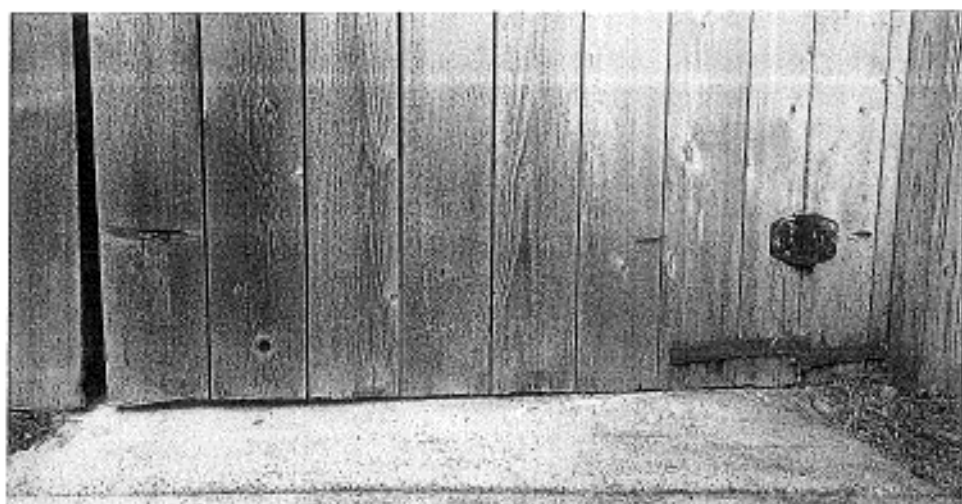


Fire caulk



Gate BTR

Gate BTR



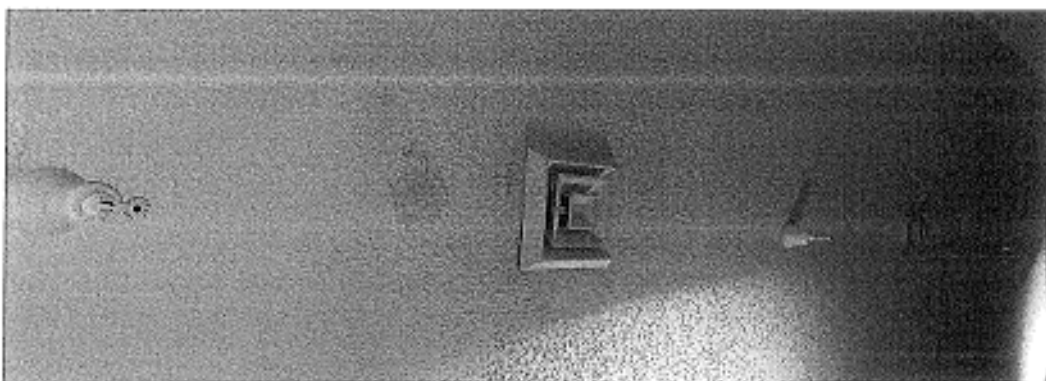
BTR Shower room



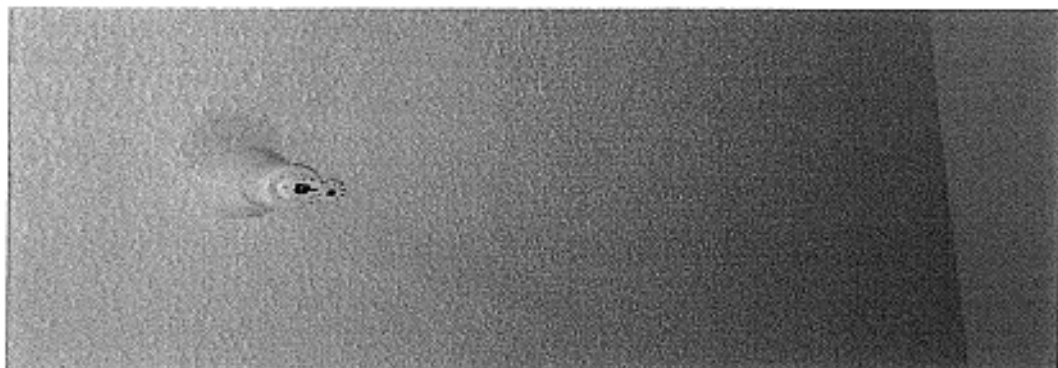
Riser room #1



200 hall sprinkler heads



200 hall sprinkler heads



Room 201 closet

