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PRINTED: 10/04/2017
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 |
|---|---|---|---|
| | HAL040008 | A. BUILDING: 01<br>B. WING _____ | 09/07/2017 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| SNOW HILL ASSISTED LIVING | 1328 S. E. SECOND STREET<br>SNOW HILL, NC 28580 |

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| C 000 | Initial Comments<br><br>Report of a Construction Section Biennial Survey by Suzanna Fay conducted on September 7, 2017.<br><br>Records indicate this facility was first licensed on November 6, 1996. The facility is currently licensed for forty Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1996 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 1996 Edition of the North Carolina Building Code(s), Institutional Occupancy. | C 000 | | |
| C 164 | Housekeeping and Furnishings-Clean, Repaired<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS<br>(a) Adult care homes shall:<br>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;<br>(2) have no chronic unpleasant odors;<br>(3) have furniture clean and in good repair;<br>(e) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the facility failed to maintain the doors in good repair.<br><br>Findings on September 7, 2017:<br>a. Room 111 - the corridor door was dragging on the frame making it difficult to open and close. This item was repaired at the time of survey.<br>b. Room 201 - the corridor door was dragging on the frame making it difficult to open and close. | C 164 | | |

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| C 188 | Continued From page 1 | C 188 | The door in room 201 will be adjusted to stop from dragging and will monitar | 11/10/17 |
| C 188 | Electrical Outlets in Wet Locations<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0310 ELECTRICAL OUTLETS<br>All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, not all of the electrical outlet at sinks had ground fault interrupters.<br><br>Findings on September 7, 2017:<br>a. Dining room - the outlet at the drink service counter did not have a ground fault interrupter. | C 188 | GFI outlet will be installed | 11/10/17 |
| C 189 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. | C 189 | | |

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| C 189 | Continued From page 2<br>Findings on September 7, 2017:<br>a. Gaps around the security camera system that penetrate the fire resistant ceiling are sealed with a foam type material that is not fire resistant rated.<br>b. Janitor's closet by Activity Room - the sprinkler head is missing the escutcheon plate leaving an opening in the ceiling.<br>c. Room 108 - the sprinkler head is missing the escutcheon plate leaving an opening in the ceiling.<br>d. Corridor outside of Room 104 - the escutcheon plate for the sprinkler head has dropped leaving a gap in the ceiling.<br>e. Room 101 bath - the escutcheon plate is missing at the sprinkler head leaving an opening in the fire rated ceiling.<br>f. Dining room - the sprinkler head in the back corner has dropped leaving a gap between the head and the fire rated ceiling.<br>g. Kitchen pantry - there is a hole in the ceiling at the sprinkler head.<br>h. Soiled linen - the escutcheon plate is missing at the sprinkler head leaving an opening in the fire rated ceiling.<br>i. Water heater room - the ceiling flange on the left water heater was damaged and falling off.<br>j. Water heater room - the ceiling above the right water heater was damaged and the penetrations from the water heating piping were not caulked. The duct for the water heater did not have a flange where it penetrated the ceiling.<br>k. Sprinkler riser room - the riser piping was not sealed or caulked where it penetrated the ceiling.<br><br>2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. To be able to resist the passage of smoke resident room doors must not have openings or holes in the doors. | C 189<br>A.<br><br>B,C,D,E F,G,H<br><br>I,J<br><br>K | The holes in the ceiling are filled with 3M Fire Block Foam it was tested in accordance to:ASTM E 84 Modified {UL 723} meets current fire blocking requirements of the international-building code{IBC}<br><br>The Escutcheon plates will be re-placed with new ones and checked Monthly to insure there still there<br><br>The ceiling plates will replaced on both hot water heaters and checked monthly to insure there still inplace<br><br>The riser pipe will be Caulked with fire caulking | 11/10/17<br><br>11/10/17<br><br>11/10/17 |

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| C 189 | Continued From page 3<br><br>Findings on September 7, 2017:<br>a. Activity Room - the door hardware was replaced and the hole for the original hardware has not been sealed.<br><br>3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Smoke resisting cross corridor doors are required to close completely and latch in the event of a fire to help limit the spread of smoke or fire from the area of origin.<br><br>Findings on September 7, 2017:<br>a. 100 Hall - the cross corridor doors were dragging on the frame and did not close and latch. This item was corrected on site.<br><br>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 compartment could be effected if doors do not completely close and latch to help limit the spread of smoke or fire from the area of origin.<br><br>Findings on September 7, 2017:<br>a. Room 209 - the door did not latch.<br><br>5. Based on observation electrical emergency/safety related equipment is not being maintained in safe operating condition.<br><br>Findings on September 7, 2017:<br>a. Laundry room - the fire alarm manual pull station was not secured to the wall.<br>b. Exit door by laundry - the protective cover over the locking system override switch was detaching from the wall making it difficult to access the switch. The box was secured at the time of this survey. | C 189<br><br>A<br><br>4-A | Door will be covered with a door plate<br><br>The door will adjusted io insure it latches | 11/10/17<br><br>11/10/17 |

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| C 189 | Continued From page 4<br><br>6. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device that is used to keep a door open is an impediment to quickly closing a door to aid in containing smoke and/or fire to the area of origin.<br><br>Findings on September 7, 2017:<br>a. Kitchen - the door separating the kitchen from dining was propped open.<br><br>7. Based on observation the facility's fire safety equipment is not maintained in a safe operating condition.<br><br>Findings on September 7, 2017:<br>a. Building signage was not provided for the fire department connection to quickly identify the connection location for emergency vehicles.<br><br>8. Observations revealed that the call system was not maintained in good working order.<br><br>Findings on September 7, 2017:<br>a. Room 102 - the call light over the door was broken. | C 189<br><br>6-A<br><br>7-A | The kitchen staff was inserviced on the fire hazards that can happen with the door proped open.Will continue to monitar<br><br>Signage will be provided for Fire Department to identify water connection | 10/10/17<br><br>11/10/17 |
| C 195 | Hot Water System<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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 | C 195 | | |

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| C 195 | Continued From page 5<br>(38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C).<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observations, the facility failed to maintain an adequate supply of hot water to one of the shared bathrooms used by residents.<br><br>Findings on September 7, 2017:<br>a. Right women's hall bath - the water temperature at the time of survey was 96 degrees Fahrenheit. | C 195<br><br>A | Water temp was adjusted and will continue to monitar | 9/7/17 |
| C 199 | Exhaust Ventilation<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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:<br>(1) soiled linen storage;<br>(2) soil utility room;<br>(3) bathrooms and toilet rooms;<br>(4) housekeeping closets; and<br>(5) laundry area.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the exhaust | C 199 | | |

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| C 199 | Continued From page 6<br>ventilation was not maintained to provide ventilation at the rate of two cubic feet per minute per square foot.<br><br>Findings on September 7, 2017:<br>a. Room 108 bath - the exhaust fan was not working and the room had a strong, unpleasant odor.<br>b. Room 109 - the exhaust fan was not working.<br>c. Left women's hall bath - the exhaust fan was not working.<br>d. Soiled linen room - the exhaust fan was not working. | C 199 | A,B,C D Exhaust fan motors will be replaced and will monitar monthly to insure exhaust fan are working | 11/20/17 |