STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034016	A. BUILDING: 01 B. WING	09/20/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VIENNA VILLAGE	6601 YADKINVILLE ROAD PFAFFTOWN, NC 27040

(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 Dennis Harrel conducted on 09/20/2017. Records indicate the middle portion of this facility was first licensed or submitted as a Home for the Aged on 3-1-1966. Therefore the middle of the facility must meet the 1967 NC State Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. The right end of the facility was built in 1985 and therefore must meet the 1978 NC State Building Code, the 1984 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. The left end of the facility was built in 2009 and must meet the 2006 NC State Building Code and the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. The facility is currently licensed for 90 residents.	C 000		
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:	C 189		

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C 189	Continued From page 1 1. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. Occupants of the building could be effected if the doors did not help to contain smoke to the area or room of origin. Finding on 09/20/2017: a. There is a pattern of doors with gaps between the doors and the door stops. Of the first ten resident rooms surveyed, five resident room doors had gaps of approximately ¼" or larger at the top of the frame between the door and the door stop. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. Occupants of the building could be effected if the doors did not help to contain smoke to the area of origin. Finding on 09/20/2017: a. The cross corridor smoke partition doors doors had gaps of approximately ¼" or larger between the two doors when the doors were closed. 3. Based on observation electrical equipment has not been maintained in a safe manner. Failure to maintain electrical equipment is a safe manner could effect the safety of person exposed to the unsafe condition. Finding on 09/202017: a. Salon - There was a multi-plug adapter plugged into a electrical outlet being used in place of fixed electrical equipment. Note: Citation was corrected while the surveyors were on site.	C 189	1a EXTENDED DOOR STOPS ON 17 DOORS – SEE ATTACHED PHOTOS 2a. ADDED ASTRAGAL TO SIX FIRE DOORS- SEE ATTACHED PHOTOS 3a. ELECTRICIAN INCREASED NUMBER OF OUTLETS IN SALON. OUTLETS ARE ON GFI CIRCUIT.	10/4/17 10/4/17 9/25/17