

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034085	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/06/2017
NAME OF PROVIDER OR SUPPLIER TRINITY ELMS		STREET ADDRESS, CITY, STATE, ZIP CODE 3750 HARPER ROAD CLEMMONS, NC 27012		
(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 Construction Section Biennial Survey by Dennis Harrell and Ed Miller on 12-6-2017. Records indicate that this facility was first licensed on 10-8-1997, for 104 beds, including 30 Special Care Beds. Based on this information, the facility is required to meet the 1996 - Rules for the Licensing of Adult Care Homes, applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and the 1996 NC State Building Code(s) for a Group I-Institutional Unrestrained Occupancy.	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; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to meet the provisions of Section 409.1.2.4 of the 1996 NC State Building Code. Section 409.1.2.4	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 101	Continued From page 1 requires that, "double egress cross corridor [smoke barrier] doors shall have... vision panels of 1/4 inch labeled wire glass mounted in in steel frames..." Additionally, a review of the original building blue prints on-site showed that doors with vision panels were specified at each smoke barrier. Finding includes; Smoke barrier doors throughout the facility were not equipped with vision panels. 2. Based on observation, the facility failed to meet the provisions of Section 1012.6.1.4.C of the 1996 NC State Building Code by not having all of the required components for doors with Special Locking System. Finding includes: There was no wiring diagram or systems components location map posted under glass at the fire alarm panel.	C 101		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, the exit door near room 707 was dragging on the exterior concrete and was hard to open. Exit doors that do not open easily could delay or prevent an evacuation in an emergency. 2. Based on observation, the corridors were not maintained free of obstructions. At least 6 feet of	C 150		

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C 150	Continued From page 2 clear width must be maintained in exit corridors. Findings include: a. There were items stored in one of the back halls reducing the clear width to about 3.5 feet. b. There were items stored in the other back hall reducing the clear width to about 4 feet.	C 150		
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 building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: Two portable medical oxygen cylinders were stored in no container in the closet in room 910. Note; This deficiency was corrected during the survey. 2. Based on observation, the hoses on the shower wands in the Beauty Salon were long enough to reach the sink basins and there were no vacuum breakers provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixtures present the possibility of siphoning contaminated water into the water	C 166		

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C 166	Continued From page 3 system unless a vacuum breaker is installed.	C 166		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: Based on observation, electrical receptacles less than 6 feet from sinks were not GFCI protected. Receptacles in areas close to wet locations that are not GFCI protected present a shock or electrocution risk. Findings include; a. The receptacle in clean utility was less than 4 feet from the sink and was not GFCI protected. b. The receptacle in the staff lounge was less than 4 feet from the sink and was not GFCI protected.	C 188		
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 4 1. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include; a. The smoke barrier doors near the library do not close completely and latch when activated by the fire alarm system. b. The smoke barrier doors near the Spa do not latch when closed by the fire alarm system. c. The closer had been removed from the ¾ hour fire rated door to soiled linen in Memory Care. This fire rated door must be self-closing and must automatically latch when closed. d. The ¾ hour fire rated door to the large laundry would not close completely and automatically latch closed. Note; This deficiency was corrected during the survey. e. The ¾ hour fire rated door to the pantry would not latch when closed. f. The doors to bedrooms 302, 307, 704 and 801 did not latch when closed. g. The door to the dining room in Memory care is damaged. 2. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. Hole in the ceiling of the main electrical room, b. Unsealed wire penetration in the ceiling of the IT room,	C 189		

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C 189	Continued From page 5 c. Sprinkler escutcheons not tightly fitted to the ceiling in the exterior storage and the outside water heater room. d. The ceiling radiation damper is very dirty in the return in the library.	C 189		
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 facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: Based on observation the facility failed to adhere to the prohibition of portable electric heaters. Portable electric heaters are a potential fire hazard and as such could effect all occupants of the facility. Finding includes: There was a portable electric heater found in the RCD office. Note; This deficiency was corrected during the survey.	C 191		