

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060142	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 09/28/2017
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

CARILLON ASSISTED LIVING OF HUNTERSVILLE

**250 COMMERCE CENTER DRIVE
HUNTERSVILLE, NC 28078**

(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 9-27-2017 and 9-28-2017. Records indicate this facility was first licensed on 10-15-2015 as a Home for the Aged with 96 beds, 27 of which are in a Special Care Unit. Based on this information, the facility was surveyed for compliance with the 2005 Rules for Adult Care Homes of Seven Beds or More and the 2012 NC State Building Code for 12 Occupancies.	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: Based on a review of documents, the most recent Fire Marshal building safety inspection report that could be found was dated in 9-2-2015. Buildings must be inspected and approved annually as required to ensure all systems can operate properly in an actual emergency.	C 111		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all	C 133		

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

TITLE

(X6) DATE

STATE FORM

6899

TPQL21

If continuation sheet 1 of 5

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NAME OF PROVIDER OR SUPPLIER
CARILLON ASSISTED LIVING OF HUNTERS VII

STREET ADDRESS, CITY, STATE, ZIP CODE
**250 COMMERCE CENTER DRIVE
HUNTERSVILLE, NC 28078**

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C 133	Continued From page 1 commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: Based on observation, there was no hand grip provided at the tub in the Spa on B Hall and C Hall.	C 133	C133 HANDGRIPS HAVE BEEN INSTALLED AT B Hall & C Hall Spas	
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 ice machine drain line was only 1/2 inch above the floor drain. Ice machine drain lines that are not maintained at least 2 inches above the floor or floor drain, as required by Code, could cause the ice to become contaminated. 2. Based on observation the courtyard gate was in a required path of egress and was very hard to open and close. Gates that are hard to open could delay or prevent an evacuation in an emergency. Note; This deficiency was corrected during the survey.	C 166	C166 1) Drain to ice machine has been cut back to at least 2" 2) Corrected on site w/surveyor	
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR	C 185		

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NAME OF PROVIDER OR SUPPLIER CARILLON ASSISTED LIVING OF HUNTERS VII		STREET ADDRESS, CITY, STATE, ZIP CODE 250 COMMERCE CENTER DRIVE HUNTERSVILLE, NC 28078		
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C 185	Continued From page 2 EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on a review of documents, the records available onsite included little to no description of what the rehearsal involved.	C 185	C185 b)(c)F - These have been discussed by CDOH as to proper procedures and Regional Maint will monitor for compliance	
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 observation, the facility failed to be maintained in a safe condition because of an exit sign not working properly. Malfunctioning exit signs could delay or prevent an evacuation in an emergency.	C 189		

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NAME OF PROVIDER OR SUPPLIER CARILLON ASSISTED LIVING OF HUNTERS VIL		STREET ADDRESS, CITY, STATE, ZIP CODE 250 COMMERCE CENTER DRIVE HUNTERSVILLE, NC 28078		
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C 189	Continued From page 3 Finding includes: The exit sign in stairway 1 did not work on battery when tested. 2. Based on observation, 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. One of the smoke barrier doors near the kitchen would not automatically latch when closed. b. The door to the employee breakroom was tied open. Note; This deficiency was corrected during the survey. c. The door to the dining room was wedged open. Note; This deficiency was corrected during the survey. d. The latchbolt was missing on the doors to bedrooms C15, C17, D1 and F10. Note; This deficiency was corrected during the survey. 3. Based on observation, the warning device, "screamer," protecting the emergency release switch at the courtyard gate would not work. Malfunctioning warning devices could allow resident elopement. Note; This deficiency was corrected during the survey. 4. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in a location. 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. Finding includes:	C 189	C189 Exit Sign has been corrected and works properly 2) Smoke barrier doors are latching correctly now b) corrected onsite w/ surveyor c) corrected onsite w/ surveyor d) corrected onsite w/ surveyor 3) corrected onsite 4	

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C 189	Continued From page 4 Unsealed penetrations in the 2nd floor electrical room.	C 189	C189 4a) Penetrations in 2nd Floor Electrical Room have been Fire-Caulked	
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: Based on observation the facility failed to maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly bacteria. Findings include: There was a pattern of exhaust fans not working throughout the facility.	C 199	C199 All Exhaust Fans have been repaired or replaced as to be 100% in compliance Verified by CDMM J. H. [Signature]	