

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL013041	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 03/08/2018
NAME OF PROVIDER OR SUPPLIER MT PLEASANT HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 935 PAGE DRIVE MOUNT PLEASANT, NC 28124		
(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 on 3-8-2018. Records indicate this facility was first licensed on 11-5-1990 with a capacity of 45 beds. A 29 bed addition to the facility was completed in 1996 increasing the capacity 74 beds. Based on this information the facility is required to meet the 1987 (for the original structure) and the 1993 (for the 1996 addition), Rules for the Licensing of Adult Care Homes and the applicable components of the 2005 Licensing of Adult Care Homes of Seven or More Beds. The facility must also meet the requirements of the 1978 (with revisions) North Carolina State Building Code for Group I - Institutional Unrestrained Occupancy (for the original structure) and the 1991 (w/revisions) North Carolina State Building Code for Group I - Institutional Unrestrained Occupancy for the 1996 addition to the facility.	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",	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 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 fire alarm system did not comply with the NC State Building Code as relates to required pull stations within 5 feet of each exit. Finding includes; The front exit door is marked with an exit sign but has no fire alarm pull station close by. The nearest pull station is approximately 20 feet away at the nurse station. 2. Based on observation and interview, the facility exits were provided in 2016 with Access Controlled egress locking as allowed by Section 1008.1.4.4 of the 2012 NC State Building Code. The locking fails to comply with the Building Code in the following ways; a. There was no sensor provided on the inside of the exits to detect an occupant approaching the door to egress. b. The "Push to Exit" switches provided at the exits did not remain unlocked for a minimum of 30 seconds. c. All 4 exits in the New Wing failed to unlock upon activation of the fire alarm system.	C 101		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors;	C 164		

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C 164	Continued From page 2 (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on observation, parts of the facility were not kept in good repair. Findings include; a. The door to room 25 was delaminating at the bottom. b. The cove type baseboard was falling off the wall in places.	C 164		
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: Based on observation, exit corridors were not maintained free of obstructions and hazards. Findings include; a. There were combustible items stored in the exit foyer near the Broad River Rehab room. Combustible storage included 12 wood folding tables, 2 plastic folding tables and a wood moving cart. b. Several other non-combustible items were stored in the same space.	C 166		
C 189	Building Equipment Maintained Safe, Operating	C 189		

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C 189	Continued From page 3 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: 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 wall at a receptacle in room 24, b. Hole in the ceiling of the Business Office Manager, c. The ceiling is water damaged in the basement. d. Unsealed conduit sleeve through the ceiling in the employee break room. Based on observation the required one-hour fire rated ceilings were compromised in several locations by large PVC pipe penetrations that are not protected by an approved assembly meeting ASTM 814. Penetrations that are not sealed in an approved manner present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. There are 3 inch PVC conduits (6) that extend unprotected up through the one-hour fire protected ceiling in the boiler room in the	C 189		

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C 189	Continued From page 4 basement. b. There are 3 inch PVC sleeves (4) that extend unprotected up through the one-hour fire protected ceiling in the boiler room in the basement. c. There is a 3 inch PVC plumbing vent that extends unprotected up through the one-hour fire protected ceiling in the boiler room in the basement. d. There are 3 inch PVC conduits (6) that extend unprotected up through the one-hour fire protected ceiling in the employee break room. 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 one hour rated cross-corridor doors near the beauty parlor did not latch when closed by the fire alarm system. b. The latchset strike was missing on the door to the beauty parlor. c. There was a 1/2 inch gap between the double doors to the dining room.	C 189		
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	C 199		

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C 199	Continued From page 5 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 provide exhaust in all required locations. Findings include; a. There was no exhaust system provided in the large housekeeping closet, about 7 feet by 11 feet, that encloses a mop sink, a lavatory and a hopper. b. There was no exhaust system provided in the housekeeping closet near the New Wing Dining room that encloses a mop sink.	C 199		