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
	HAL065014	A. BUILDING: 01 B. WING _____	02/14/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING ARBOR OF WILMINGTON	809 JOHN D BARRY DRIVE WILMINGTON, NC 28412

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C 000	Initial Comments Report of a Biennial Construction Survey by Suzanna Fay and Ed Miller conducted on February 14, 2018. Based on the information obtained from DHSR database, the Spring Arbor of Wilmington facility was first licensed on August 6, 1997. The facility is currently Licensed for sixty-six beds including fourteen SCU Beds. Therefore, we are requiring that this facility meet the 1996 "Regulations for Homes for the Aged and Disabled ; Minimum standards and Regulations, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1996 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I). Deficiencies were cited and a Plan of Correction is required.	C 000	See attached	
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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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 did not meet the building code requirements for special locking in effect at the time of construction or alteration. Findings on February 14, 2018: a. The facility did not have a wiring diagram and components location map for the special locking system posted at the fire alarm panel(s).	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; (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: 1. Observations revealed that the walls and floors were not kept in good repair. Findings on February 14, 2018: a. AL Spa - the door to the toilet room is dragging and damaging the floor finish.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 166		

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C 166	Continued From page 2 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 facility is not maintained free from hazards if the code required clearance of 36" in front of electrical breaker panels is not maintained. Findings on February 14, 2018: a. Boiler room - access to the electrical panels and generator transfer switch is obstructed by items stored in front of the panels.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR 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: 1. Review of records revealed that the fire rehearsal logs did not include the required	C 185		

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C 185	Continued From page 3 information when conducting and recording drills. Findings on February 14, 2018: a. The fire rehearsal drill log did not provide a short description of what the rehearsal involved.	C 185		
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 and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be effected if the equipment failed to alert the occupants in case of a fire. Findings on February 14, 2018: a. 11:00 AM: The fire alarm system was discovered to be partially disabled. The system was tested by spraying canned smoke into a smoke detector. The first attempt to set off the alarm, the strobes activated and the magnetic lock at the SCU released. None of the hold open magnets for the smoke doors released and the horns did not sound. A second attempt at testing the fire alarm using canned smoke yeilded similar results. At the second attempt, the magnetic lock	C 189		

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C 189	Continued From page 4 at the SCU unit released, but the strobes did not flash, the horns did not sound and the hold open magnets did not release the smoke doors. A third attempt was made by pulling a pull station with similar results. Interview with staff revealed that the sprinkler pipes had burst and damaged the fire alarm panel. They had replaced the board in the panel two weeks ago. The facility was placed on a fire watch and the fire alarm vendor was notified. The surveyors returned to the facility at 5:00 PM after the vendor had made repairs. The system was tested and functioned correctly. 2. 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		
	Findings on February 14, 2018: a. Entry cupola - one of the sprinkler escutcheon plates is loose and separated from the wall. b. Room 202 bath - there is a small gap at the sprinkler head escutcheon plate. c. The wifi router outside of Room 206 is not secure to the ceiling leaving openings in the fire resistant assembly. d. SCU mechanical room - the fire caulk around one penetration is coming loose leaving an opening in the fire resistant ceiling assembly. 3. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating due to sprinkler heads being obstructed could effect occupants in the fire compartment if the sprinkler head could not			

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C 189	Continued From page 5 suppress a fire. Findings on February 14, 2018: a. Closet by Room 213 - a box was stored within 18" of the sprinkler head. b. Marketing storage by kitchen - items were stored within 18" of the sprinkler head. c. Kitchen pantry - dry food items were stored within 18" of the sprinkler head. The items were removed at the time of survey. d. Storage closet by Trash room - combustible items were stored within 18" of the sprinkler head. The items were removed at the time of survey. 4. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not activate during a fire or other emergency.	C 189		
	Findings on February 14, 2018: a. During the freezing temperatures of January, the facility had several sprinkler pipes burst. The sprinkler system was repaired and the system is operational. The damaged rooms were not occupied. The facility is in the process of repairing the areas affected by the burst pipes. 5. 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 exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on February 14, 2018: a. Library - one leaf of the door drags and does			

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C 189	Continued From page 6 not close when released. The doors do not have automatic flush bolts. b. Room 116 - the door does not latch. c. Activity Room - the doors do not have automatic flush bolts. The left leaf did not latch when released. 6. 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. Findings on February 14, 2018: a. Room 113 - a multiplex adapter was plugged into a duplex receptacle. Several devices were plugged into the adapter. 7. Based on observation the mechanical equipment is not maintained in a safe or operating condition. Failure to maintain the equipment could possibly create an unsafe or hazardous condition that would effect occupants of the facility. Findings on February 14, 2018: a. AL Mechanical room off of Spa - there was an odor of natural gas coming from the mechanical room when the door to the spa was opened. 8. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin. Findings on February 14, 2018:	C 189		

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C 189	Continued From page 7 a. Beauty Salon - there is a kickdown device on door to the beauty salon. 9. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops. Findings on February 14, 2018: a. Dining room - there is a gap at the top of the door that exceeds the minimum allowed.	C 189		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (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 (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 observations, the hot water temperature at all fixtures used by residents was not maintained at a minimum of 100 degrees F and exceeded 116 degrees F. Findings on February 14, 2018: a. The water temperature exceeded 116 degrees	C 195		

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C 195	Continued From page 8 F in three of three locations tested. Two of the locations exceeded 120 degrees F.	C 195		
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: 1. Observations revealed that the facility failed to provide exhaust ventilation at the rate of two cubic feet per minute per square foot in required areas. Findings on February 14, 2018: a. Kitchen utility - the exhaust fan appears to be blowing air into the space. b. Laundry room - the exhaust fan is not working.	C 199		