STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL049028	A. BUILDING: **01** B. WING _____	R **03/15/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AURORA OF STATESVILLE	**1902 ORA DRIVE STATESVILLE, NC 28625**

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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Ed Miller, conducted on March 15, 2018. Deficiencies were cited that will require a new Plan of Correction.	{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 requirements of the NC State Building Code in effect at time of alteration. The Building Code permits the installation of Special Locking (magnetic locks) on exit doors of buildings that are protected throughout, by an approved supervised automatic fire detection system or an automatic sprinkler system.	{C 101}		

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{C 101}	Continued From page 1 Finding Includes: The entire facility was equipped with Special Locking on all the exits and there were not any fire detection devices in the closets throughout the unsprinklered older side. Review of DHSR Construction Records show a record of approval(s) from an installation project which occurred in 2011 However, the original project was for the special care unit only and abruptly added additional locks to the unsprinklered older side midway through. There is no record if the automatic fire detection coverage of the unsprinklered building was addressed. Findings on March 15, 2018: Interview of Maintenance Tech revealed that a contractor was on site the day before, measuring and taking notes to prepare document for permitting.	{C 101}		
{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: Findings on March 15, 2018: 1. Based on a review of documents, the most recent Fire Marshal building safety inspection report was dated in 2-9-2016. Buildings must be inspected and approved annually as required to ensure all systems can operate properly in an	{C 111}		

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{C 111}	Continued From page 2 actual emergency. Findings on March 15, 2018: 3. Based on a review of documents, the most recent Sprinkler system inspection cited several deficiencies. There was no subsequent documentation to indicate the deficiencies had been corrected. Deficiencies include; a. Gauges due to be recalibrated or replaced. b. Five year internal pipe and check valve inspection due. c. All quick response heads are over 20 years old with no record of testing or replacements.	{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 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 shower in room 12. Findings on March 15, 2018: Interview of Maintenance Tech revealed that the installed grip was torn off the wall last night.	{C 133}		
{C 152}	Entrances-Steps, Porches with Handrails SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT	{C 152}		

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{C 152}	Continued From page 3 (h) The requirements for outside entrances and exits are: (2) All steps, porches, stoops and ramps shall be provided with handrails and guardrails; This Rule is not met as evidenced by: Based on observation, handrails were loosely mounted on exterior egress ramps. Findings on March 15, 2018: a. Interview of Maintenance Tech revealed the handrail was repaired. Surveyor is unsure if the handrail would support a 250 pound force.	{C 152}		
{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 on March 15, 2018: a. Per observation and interview of Maintenance Tech, a new large oxygen cylinder is being stored not in a rack in the basement. The current rack cannot handle the larger size.	{C 166}		

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{C 166}	Continued From page 4 b. Per observation a new oxygen cylinder is being stored not in a rack on the floor in room 36.This deficiency was corrected during the survey. 3. Based on observation, the facility was not maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability of the fire sprinkler system to extinguish a fire. Findings on March 15, 2018: Per interview of Maintenance Tech, storage was removed, but now new items are being stored back in the same location within 18 inches of sprinkler head.	{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 outlets in potentially wet locations were not provided with ground fault circuit protection. Findings on March 15, 2018: A receptacle next to the sink in the new side dining room was not ground fault protected.	{C 188}		
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	{C 189}		

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{C 189}	Continued From page 5 (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: 3. Based on observation, the facility failed to be maintained in a safe condition because of an exit sign pointing to a locked exit. Locked exits could delay or prevent an evacuation in an emergency unless all stall responsible for evacuation carry a key at all times when on duty. Findings on March 15, 2018: a. An exit sign in the SCU directs exiting to a locked door which leads to the Courtyard. Interview with Maintenance Tech, revealed that most did not carry a key to the locked exit door, and the Maintenance Tech unlocked the door by turning a thumb turn from the courtyard side. 4. 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 on March 15, 2018: d. The door to room 31 was hard to open. e. The door to bedroom 9 was propped open with a water jug. New Findings on March 15, 2018: AA. Per observation and interview of Maintenance Tech, the pair of corridor doors to the dining room in Special Care Unit now closes when the fire	{C 189}		

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{C 189}	Continued From page 6 alarm releases them. These doors close but the inactive leaf does not close first and latch into the frame when the active leaf closes. AB. The door to bedroom 29 was propped open with a oxygen cylinder. AC. Bulk Laundry - the corridor door was replaced with a 20 min door instead of a 45 min door required for a laundry. 5. Based on observation, the warning devices, "screamers," protecting the emergency release switches at exits were not working at several locations. Malfunctioning warning devices could allow resident elopement. Malfunctioning warning devices are located at; Findings on March 15, 2018: a. Courtyard gate - Per observation and interview of Maintenance Tech, the cover over the emergency release switch did not sound when the cover is open.	{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: 1. Based on Observation, the facility failed to	C 191		

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C 191	Continued From page 7 prevent the use of unvented fuel burning room heaters portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if heater is the ignition source of a fire. New Finding on March 15, 2018: a. Executive Director Administrator Office - a portable electric heater was found in this room.	C 191		
{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 on March 15, 2018: The exhaust fan provided would not work in the laundry.	{C 199}		