

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL055007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/25/2018
NAME OF PROVIDER OR SUPPLIER HEATH HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 919 WILMA SIGMON ROAD LINCOLNTON, NC 28092		
(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 4-25-2018. Records indicate that this facility was licensed 7-25-1997 for 60 beds. Based on this information, we are requiring the facility to meet the 1996 Rule for Homes for the Aged and Disabled - Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 Edition of the North Carolina State Building Code- Section 409.1, Group I-Unrestrained Occupancy.	C 000		
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 the bathroom off bedroom 116.	C 133		
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.	C 189		

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

TITLE

(X6) DATE

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C 189	Continued From page 1 (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 did not maintain the fire rating of the Building Code required doors to laundries greater than 100 square feet to have 3/4 hour fire rated doors that are self-closing or automatic closing by smoke detection. Finding includes; There were 2 doors from the corridor to the large laundry of approximately 15 feet by 26 feet. One of the doors was 3/4 hour rated and self-closing. The other door was not rated and was held open with a permanent magnet. 2. Based on observation, battery powered emergency lights would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. Mal-functioning lights include the following areas: a. All 5 of the exterior fixtures installed near the exits. b. Corridor near the common bathroom. 3. 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 latchset bolt is missing on the door to the employee break room, b. The door from the kitchen to the corridor does	C 189		

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C 189	Continued From page 2 not fit the opening properly to be resistant to the passage of smoke. c. The door to bedroom 102 does not fit the opening properly to be resistant to the passage of smoke. d. The door to bedroom 206 does not fit the opening properly to be resistant to the passage of smoke. e. The door to bedroom 207 does not fit the opening properly to be resistant to the passage of smoke. f. There was a permanent magnet holding open one of the doors to the large commercial laundry. This door must be fire rated and must be self-closing or automatic closing on activation of the fire alarm system. 4. Based on observation the required one-hour fire rated ceiling was 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: Unsealed wire penetration ceiling of the med room.	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	C 191		

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C 191	Continued From page 3 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 affect all occupants of the facility. Findings include: There were 2 portable electric heaters found in the private dining room.	C 191		