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
	HAL065002	A. BUILDING: 01 B. WING ______	06/13/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE COMMONS AT BRIGHTMORE	2320 FORTY-FIRST STREET WILMINGTON, NC 28403

(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 a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on June 13, 2018. Records indicate this facility was first licensed on 8-24-1987, with additions to the Azalea wing starting on 6-21-1990, and Magnolia wing on 2-11-1991 and a 35 bed addition starting on 7-17-1997. The facility is currently licensed for 201 residents including a 35 Bed Special Care Unit. Based on this information we are requiring the original facility to meet the 1987 Rules 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 1978 NC State Building Code. The Special Care Unit must meet the 1996 Rules 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 NC State Building Code Volume I, Section 409. Deficiencies were cited that require a 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,	C 101		

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C 101	Continued From page 1 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;	C 101		
	This Rule is not met as evidenced by: 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all of the required components to properly operate doors equipped with Special Locking Arrangements. This could affect all occupants who would need to evacuate through the door(s). Findings on June 13, 2018: a. Breezeway Entrance into Paraklay Wing - the "special Locking" door was not equipped with an on/off emergency release switch on the breezeway side. This switch must be installed within three feet of the door. This arrangement creates a 32-foot dead end in the breezeway .	C-101 1-A	AN ON/OFF EMERGENCY RELEASE HA BEEN INSTALLED AT THIS LOCATION ON 6/27/18 BY PROTECTION ONE OUR ALARM VENDER - THE REST OF THE FACILITY WILL BE CHECKED FOR SIMALAR INFRACTIONS	6/27
C 148	Corridors-Handrails SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load;	C 148		

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C 148	Continued From page 2 This Rule is not met as evidenced by: 1. Based on observation, the building was not providing handrails in the corridor. This deficiency affects residents, staff and visitors who use unstable handrails by not providing increase safety, stability/balance, and maneuverability provide by these devices. Findings on June 13, 2018: a. Azalea Wing Corridor between Bedrooms 45 & 49 - there is not handrail for about 10 feet since a doorway was close-up.	C 148 C-148 1-A	HAND RAIL HAS BEEN INSTALLED AT LOCATION IN QUESTION ON 6/18/18 - BY MAINTENANCE STAFF	6/18
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on June 13, 2018: a. Paraklay Wing Exit near Bedroom 90 - there are three piece of furniture blocking this exit. Deficiency corrected before Construction Surveyors departed site	C 150 C-150 1-A	FURNITURE WAS REMOVED AT TIME OF SURVEY - 6/13/18 - STAFF CONTRACTED AND EDUCATED AS TO THE SEVERITY OF THIS SITUATION - IN THE FURTURE THIS WILL BE CLOSLY MONITORED BY AREA DIRECTOR ON UNIT.	6/13
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	C 164		

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C 164	Continued From page 3 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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on June 13, 2018: a. Paraklay Wing Soiled Linen - the ventilation grille with its radiation damper have an excessive accumulation of dust/lint.	C 164 C-164 1-A	VENTILATION GRILLE WAS CLEANED BY MAINTENANCE STAFF ON 6/15/18 IN FURTURE THIS WILL BE MONITORED MORE CLOSELY BY MAINTENANC STAFF AND HOUSEKEEPING	6/15
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 facility exits were not maintained free of all obastructions. This would affect residents, staff, and visitors by requiring more time to exit the building during an emergency. Findings on June 13, 2018: a. Oleander Wing Gate near Bedroom 26 - the gate has a gate latch, and two surface bolts to turn sideways to operate, before the gate would open.	C 166 C-166 1-A	BOTH SURFACE BOLTS WERE REMOVED AND A ONE MOTION LATCH INSTALLED BY MAINTENANCE STAFF ON 6/18/18 - GATE WILL BE CHECKED AND RECORDED ON A DAILY BASIC BY MAINTENANCE TO INSURE THIS DOES NOT REOCCURE	6/18

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C 166	Continued From page 4	C 166		
	2. Based on observation, the Building plumbing equipment was not maintained in a clean and orderly manner free if hazards. Findings on June 13, 2018: a. Central Core Men - the connection of the commode to the floor is loose.	C-166 2-A	COMMODE WAS REMOVED - RE BOLTED - RE-SEALED ON 6/28/18 BY MAINTENANCE STAFF	6/28
C 188	Electrical Outlets in Wet Locations	C 188		
	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.	C-188 1-A	NON-GROUNDED RECEPTACLE WAS REMOVED ON 6/18/18 AND A GFI RECEPTACLE WAS INSTALLED BY MAINTENANCE STAFF	6/18
		1-B	GROUND - FAULT - INTERRUPTER WAS REPLACED ON 6/18/18 BY MAINTENANCE STAFF	
	This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on June 13, 2018: a. Central Core Staff Men - the electrical power receptacle near the sink is within six feet of the sink, and is not ground fault protected. b. Central Core Men - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not trip with a push of the test button and when tested with a circuit tester. c. Oleander Wing Beauty Shop - the electrical power receptacle near the sink is within six feet of the sink, and is not ground fault protected. d. .Magnolia Wing Community Spa - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not reset after the test button is pushed.	1-C	NON-GROUNDED RECEPTACLE WAS REMOVED AND REPLACED WITH GFI RECEPTACLE ON 6/28/18 BY MAINTENANCE STAFF	6/28
		1-D	GROUND FAULT INTERRUPTER WAS REPLACED ON 6/18/18 BY MAINTENANCE STAFF.	6/18
		NOTE	GFI IN FACILITY ARE RANDOMLY CHECKED - IN FURTURE MORE WILL BE CHECKED A TIME OF AUDIT AND DOCUMENTED	

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C 189	Continued From page 5	C 189		
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.	C 189 C-189 1-A	HEAT DETECTOR HAS BEEN RESECURED IN POSITION AND IS FULLY OPERATIONAL - CORRECTED BY PROTECTION ONE - OUR ALARM VENDOR ON 6/27/18	6/27
	This Rule is not met as evidenced by: 1. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on June 13, 2018: a. Central Core Laundry - the fire alarm system's heat detector was dangling from the ceiling by its power/operational wire. b. Magnolia Wing Mech Room - the sample tubes for the HVAC duct mounted smoke detectors are dirt in the back unit.	1-B	SAMPLE TUBE IN QUESTION WAS MISSED ON PREVIOUS AUDIT - IT HAS BEEN CLEANED BY MAINT. STAFF ON 6/18/18	6/18
		2-A	All EXIT SIGNS AT FACILITY ARE ON BACK UP GENERATOR POWER IN CASE OF POWER OUTAGE	
	2. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on June 13, 2018: a. Azalea Wing near Cafe - the exit sign did not illuminate on backup power when tested. Exit signs must work on backup power to provide directions during power outages. b. Breezeway Right Exit - the self-contained emergency light did not illuminate on backup	2-B	NEW BATTERY HAS BEEN Added to light IN QUESTION WORKING PROPERLY 7/8/18 MAINT STAFF	7/8/18

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C 189	Continued From page 6 power when the test button is pushed.	C 189		
	3. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on June 13, 2018: a. Central Core Header across the Corridor Going into Oleander Wing - the exit sign on the header has both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit, but the way out is straight.	C-189 3-A	CHEVRON DIRECTIONAL INDICATORS HAVE BEEN REPLACED ON EXIT SIGN IN QUESTION ON 6/14/18 BY MAINTENANCE STAFF	6/14
	4. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on June 13, 2018: a. Magnolia Wing Smoke Barrier near Bedroom 110 - the right leaf, of the double-egress cross-corridor doors, is blocked from closing because a patient lift is sitting in front of this door when the fire alarm system released the doors. Deficiency corrected before Construction Surveyors departed site	4-A	LIFT WAS REMOVED AT TIME OF SURVEY ON 6/13/18 - STAFF WAS CONTRACTED AND EDUCATED AS TO THE SEVERITY OF THIS SITUATION - IN FURTURE THIS will CLOSELY MONITORED BY AREA DIRECTOR ON UNIT.	6/13
	5. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on June 13, 2018: a. Azalea Wing Lounge - the corridor pair of doors have been removed leaving the space open to the corridor. Note: There is no smoke detection connected to the fire alarm in this room which is required for spaces open to the corridor.	5-A	SMOKE DECTECTOR WAS ADDED TO AREA IN QUESTION ON 6/27/18 AND IS OPERATIONAL - BY PROTECTION ONE - ALARM VENDOR AND WILL BE MONITORED by QUARTERLY INSPECTIONS	6/27

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C 189	Continued From page 7	C 189		
	b. Azalea Wing Bedroom 34 - the corridor door did not latch into its frame when closed. Deficiency corrected before Construction Surveyors departed site	C-189 5-B	DOOR IN QUESTION WAS CORRECTED AT TIME OF SURVEY ON 6/13/18	6/13
	c. Magnolia Wing Kitchen - the corridor door did not latch into its frame when closed.	5-C	STRICKER PLATE WAS MOVED ON DOOR FRAME TO ACCOMODATE BOLT ON 6/18/18	6/18
	d. Magnolia Wing Bedroom 80 - the corridor door will not close.	5-D	DOOR RM 80 ADJUSTED AND CLOSES PROPERLY - MAINT. STAFF 6/15/18	6/15
	e. Paraklay Wing Bedroom 100 - the corridor door did not latch into its frame when closed.	5-E	DOOR RM 100 ADJUSTED AND CLOSES PROPERLY - MAINT STAFF 6/15/18	6/15
	f. Paraklay Wing Bedroom 105 - the corridor door did not latch into its frame when closed.	5-F	DOOR RM 105 ADJUSTED AND CLOSES PROPERLY - MAINT. STAFF 6/15/18	6/15
	6. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in Room of origin. Findings on June 13, 2018: a. Azalea Wing Community Spa - a firestopped cable penetration had its sealant pulled out of the penetration to the fire-resistance-rated ceiling, leaving an unprotected opening.	6-A	CABLE RE-CAULKED WITH FIRE RATED CAULK - MAINT. STAFF 6/13/18	6/13
	b. Azalea Wing Mech IV - there is a gap around a conduit not firestopped as it penetrates the fire-resistance-rated ceiling assembly.	6-B	GAP IN QUESTION CAULKED WITH FIRE RATED CAULK - MAINT. STAFF 6/13/18	6/13
	c. Azalea Wing Header across the Corridor near Bedroom 38 - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly above the exit sign.	6-C	HOLE IN QUESTION SEALED WITH FIRE RATED CAULK - MAINT. STAFF 6/13/18	6/13
	d. Central Core Mech near Laundry - there is ductwork sealed with orange foam as it penetrates the fire-resistance-rated ceiling. This orange foam is not approved for penetrations through fire-resistance-rated ceiling.	6-D	THE PENETRATIONS IN QUESTION WERE RE-CAULKED WITH FIRE RATED CAULK - MAINT STAFF - 7/7/18	7/18
	e. Central Core Riser Room near Kitchen - there is a gap around a 3 inch conduit not proper firestopped with a firestop collar as it penetrates the fire-resistance-rated ceiling assembly.	6-E	CONDUIT SEALED WITH DRYWALL MUD AND FIRE RATED CAULK - MAINT. STAFF - 6/15/18	6/15
	f. Central Core Mech II - there are multiple gap and holes around ductwork as it penetrates the	6-F	Complete By 7/24/18	

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C 189	Continued From page 8	C 189		
	fire-resistance-rated ceiling	C-189 6-H	AREA IN QUESTION WAS CORRECTED WITH 5/8 DRYWALL - THE SAME FIRE-RESISTANCE-RATING AS ORIGINAL CEILING ON 7/2/18	7/2
	h. Oleander Wing Corridor near Bedroom 7 - there is a surface attached patch (one layer of 3/4 inch plywood) to the one-hour fire-resistance-rated ceiling assembly using fasteners. The patch materials must provide the same fire-resistance-rated protection as the original ceiling.	6-I	AREA IN QUESTION WAS CORRECTED WITH 5/8 DRYWALL - THE SAME FIRE RESISTANCE RATING AS ORIGINAL CEILING ON 7/2/18	7/2
	i. Magnolia Wing Corridor near Bedroom 67 - there is a surface attached patch (one layer of 3/4 inch plywood) to the one-hour fire-resistance-rated ceiling assembly using fasteners. The patch materials must provide the same fire-resistance-rated protection as the original ceiling.	6-J	AREA IN QUESTION WAS CORRECTED ON 6/29/18 WITH FIRE-RATED CAULK MAINT. STAFF	6/29
	j. Magnolia Wing Riser Room - there is a gap around a pipe and a conduit not firestopped as they penetrate the fire-resistance-rated ceiling assembly.			
	7. Based on observation, the Building was not maintained in a safe manner by not maintaining a clear unobstructed exit path from the building. This would affect all residents, staff and visitors by obstructing egress during an emergency. Findings on June 13, 2018: a. Central Core Courtyard near Dining - the Dining Room exits, discharge on to a patio that is surrounded on three sides with walls. The open side has vegetation that has grown, closing-up the path of egress to 14 inches.	7-A	VEGETATION IN QUESTION WAS REMOVED ON 6/27/18 MAKING PATH OF EGRESS 60 INCHES NOW.	6/27
	9. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on June 13, 2018: a. Azalea Wing Porch near Bedroom 40 - the ground-fault circuit-interrupter (GFCI) electrical	9-A	GFCI RECEPTACLE IN QUESTION WAS SECURELY REPOSITIONED BACK IN PLACE ON 6/15/18 - MAINT. STAFF	6/15

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	power receptacle is falling out of the wall. b. Azalea Wing Header across the Corridor - the exit sign has exposed electrical wires between exit sign and the conduit in the ceiling.	9-B	EXIT SIGN IN QUESTION HAS BEEN REPOSITIONED AND CORRECTED ON 7/7/18 MAINT. STAFF	7/7
	c. Central Core Reception Area - the light fixture is falling down from the ceiling.	9-C	light FIXTURE IN QUESTION HAS BEEN REMOVED FOR lobby RENOVATION ON 6/14/18	6/14
	d. Magnolia Wing Community Spa - the light switch is not working.	9-D	light FIXTURE REPLACED - WORKING PROPERLY 7/7/18 MAINT. STAFF	7/7
	e. Magnolia Wing Old Nurse Station - the light fixture is not working.	9-E	light FIXTURE IN QUESTION - BALLAST REPLACED - WORKING PROPERLY 7/7/18 MAINT. STAFF	7/7
	10. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin. Findings on June 13, 2018: a. Azalea Wing Cafe - the fire sprinkler escutcheon plate does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.	10-A	ESCUTHEON IN QUESTION CORRECTED 6/30/18 MAINT. STAFF	6/30
	b. Magnolia Wing Corridor near Bedroom 61 - the fire sprinkler escutcheon plate has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.	10-B	ESCUTHEON IN QUESTION CORRECTED 6/30/18 MAINT STAFF	6/30
	c. Paraklay Wing Service Kitchen - the fire sprinkler escutcheon plate does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.	10-C	ESCUTHEON IN QUESTION HAS BEEN REPOSITIONED AND SEALED WITH FIRE RATED CAULK - MAINT. STAFF 6/15/18	6/15
	d. Paraklay Wing Bedroom 98 - the fire sprinkler escutcheon plate does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.	10-D	ESCUTHEON IN QUESTION HAS BEEN REPOSITIONED AND SEALED WITH FIRE RATED CAULK - MAINT. STAFF 6/15/18	6/15
	11. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on June 13, 2018:			

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(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 189	Continued From page 10	C 189		
	a. Central Core Staff Lounge - the corridor door has a wedge holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch.	C-189 11-A	WEDGE (TRASH CAN) REMOVED AND A (light pull) magnet INSTALLED to KEEP DOOR OPEN WHEN REQUIRED 6/29/18 MAINT. STAFF	6/29
	b. Magnolia Wing Janitors - the corridor door has a kick down device holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch.	11-B	KICK DOWN DEVICE REMOVED SO DOOR WILL FUNCTION PROPERLY AND NOT STICK IN AN EMERGENCY 6/15/18 MAINT. STAFF	6/15
	c. Paraklay Wing Service Kitchen - the corridor door has a wedge holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch.	11-C	WEDGE REMOVED AND A (light pull) MAGNET INSTALLED TO KEEP DOOR OPEN WHEN REQUIRED. 6/13/18 MAINT. STAFF	6/13
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. Based on observation the facility failed to maintain the exhaust ventilation equipment in rooms required to be mechanically exhausted. Findings on June 13, 2018: a. Oleander Wing Community Bath - the	C 199		

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
	HAL065002	A. BUILDING: 01 B. WING ______	06/13/2018

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C 199	Continued From page 11 exhaust ventilation systems radiation damper is close, so there is no exhausting of odors in this room. b. Paraklay Community Bathroom Toilet Room - the required exhaust ventilation system did not work, and there is odor.	C 199 C-199 1-A	FUSEABLE. LINK REPLACED ON RADIATION DAMPER - EXHUAST. WORKING PROPERLY - HVAC STARTPLUS HVAC VENDOR 6/27/18	6/27/18
		1-B	Complete By ~~7/20/18~~ dd 7/10/18 Scott Electric	7/10/18