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
	HAL060054	A. BUILDING: 01 B. WING _____	R 08/29/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PARKER TERRACE	3800 SHAMROCK DRIVE CHARLOTTE, NC 28215

(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 Biennial Follow Up Construction Survey by Dennis Harrell on 8-29-2018. Some deficiencies were not corrected. Further action is required.	{C 000}		
{C 134}	Bathrooms-Roll-in Shower SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (7) Each home shall have at least one bathroom opening off the corridor with: (A) a door of three feet minimum width; (B) a three feet by three feet roll-in shower designed to allow the staff to assist a resident in taking a shower without the staff getting wet; (C) a bathtub accessible on at least two sides; (D) a lavatory; and (E) a toilet. (8) If the tub and shower are in separate rooms, each room shall have a lavatory and a toilet; This Rule is not met as evidenced by: 1. Observations revealed that the facility does not meet the requirements for bathrooms and toilet rooms. The bathroom off of the corridor has been converted to use as a laundry room. Findings on 8-29-2018: a. There is one community bathroom located on the second level. The bathroom has been modified for use as a laundry. The shower walls are intact, but the hardware has been removed. Verify that the facility has provided a bathroom off of the corridor with a three foot by three foot roll-in shower for residents who need assistance.	{C 134}	C-134 Following the inspection conducted June 2018 the bathroom – roll-in shower room that had been converted to a laundry room years ago has been restored. The shower and tub each have the required clearance and accessibility, the commode was re-installed along with the existing sink to bring us back into compliance with the regulation. As of 10/9/18 all work is complete. See attached photos.	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Jim Weatherhead, COO 10/9/18

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{C 134}	Continued From page 1 b. The community bath toilet had been removed.	{C 134}		
{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 facility did not conduct and record fire rehearsals in accordance to the licensure rules. Findings on June 20, 2018: a. Rehearsals were not being conducted on each shift per quarter. Available records showed that the second floor conducted drills on the first and third shift of the first quarter of 2018. No records were available for the third floor. Records showed that for the second quarter of 2018, the second floor conducted drills on the second and first shifts only. The third floor conducted 2 drills on the first shift only. b. The fire rehearsals did not include a short description of what the rehearsal involved. Findings on 8-29-2018;	{C 185}	C-185 Proper documentation of fire drills conducted quarterly on each shift will be maintained by our Director of Risk Management. See attached for documentation relating to the fire drills conducted since June, 2018.	

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{C 185}	Continued From page 2 There were no records available onsite after April of 2018.	{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 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 and walls could allow fire and smoke to spread beyond the area of origin. Findings on June 20, 2018: b. Electrical Room off of Med Room (2nd Floor) - There was an unsealed conduit sleeve, a hole in the wall and an unsealed opening to the 3rd floor.	{C 189}	C-189 As of 10/9/18 all penetrations in the Electrical Room off the Med Room have been resolved. See attached photos. The Maintenance department has checked all areas to ensure any penetrations have been properly sealed.	

Fire Drill Evaluation Report

Parker Terrace 2	2125 Calc Drive		
Facility Name	Facility Address		
Marvin Clinkscales	6/29/18	3rd - 6:08 AM	
Facility Contact	Date	Time of Day	
Lori Furr	7015327035	2nd fl - RM Nurse Station	
Drill Evaluator	Telephone	Area / Floor(s) of drill	

All persons removed from fire room or immediate danger to a safe location	(10)	7	4	0
Door to fire room and doors to other areas closed but not locked	(10)	7	4	0
Fire alarm activated without delay or automatic activation occurs	10	(7)	4	0
Fire location communicated to other staff by public address system or other means	(10)	7	4	0
Staff reports to area of alarm origin to assist and search or begins assigned duties	(10)	7	4	0
Hallways, corridors, exit doors and all paths of egress cleared of obstructions	(10)	7	4	0
A staff person took charge and made assignments as necessary	(10)	7	4	0
All fire doors and other life safety equipment operated properly	(10)	7	4	0
Staff called 9-911 and Security 7045	(10)	7	4	0
Call from monitoring company to 911 – received_____ (within 2 minutes)	10	7	4	0
Time: Min___ Sec 49 — Up to 4min =5; 4:01 – 5:30 =2; >5:30 =0		5	2	0
Score – Add columns together and enter total			%	
(100-93-Very Good) (92-82-Good) (81-70-Acceptable) (69 and below – Unacceptable and will be redrilled)				

Lori Furr
Safety Committee Observer 1

Safety Committee Observer 2

Comments:
Simulated drill took place in Nurse's Station on 2nd Floor - Staff did a great job responding demonstrated RACE procedure to put out small trash can fire. ~~Tea~~ were knowledgable about location of pull stations/ extinguishers. Called 911/ Security as required.

Fire Drill Evaluation Report

Parker Terrace 2 Facility Name	2125 Cole Drive Facility Address	
Marvin Clinkscales Facility Contact	6/28/18 Date	1st 2:15 pm Time of Day
Lori Furr Drill Evaluator	704-532-7035 Telephone	2nd Floor - Rm. Area / Floor(s) of drill

All persons removed from fire room or immediate danger to a safe location	(10)	7	4	0
Door to fire room and doors to other areas closed but not locked	(10)	7	4	0
Fire alarm activated without delay or automatic activation occurs	(10)	7	4	0
Fire location communicated to other staff by public address system or other means	10	(7)	4	0
Staff reports to area of alarm origin to assist and search or begins assigned duties	(10)	7	4	0
Hallways, corridors, exit doors and all paths of egress cleared of obstructions	10	(7)	4	0
A staff person took charge and made assignments as necessary	(10)	7	4	0
All fire doors and other life safety equipment operated properly	(10)	7	4	0
Staff called 9-911 and Security 7045	(10)	7	4	0
Call from monitoring company to 911 – received_____ (within 2 minutes)	10	7	4	0
Time: Up to 4min =5 4:01 – 5:30 =2 >5:30 =0 Min____ Sec 52		5	2	0
Score – Add columns together and enter total			%	

(100-93-Very Good) (92-82-Good) (81-70-Acceptable) (69 and below – Unacceptable and will be redrilled)

Lori Furr
Safety Committee Observer 1

Safety Committee Observer 2

Comments:
Simulated fire drill conducted on PT2 - "Fire" in Room 237. Staff responded appropriately called Security & 911 (after pulling alarm) removed residents from area of immediate danger.

Fire Drill Evaluation Report

Parker Terrace 3 — Facility Name	2125 Cole Drive — Facility Address
Mamie Clinkscales — Facility Contact	6/28/18 — Date; 2nd 6:47 pm — Time of Day
Lori Furr — Drill Evaluator	704-532-7035 — Telephone; 3rd fl - Rm 314 — Area / Floor(s) of drill

All persons removed from fire room or immediate danger to a safe location		(10)	7	4	0
Door to fire room and doors to other areas closed but not locked		(10)	7	4	0
Fire alarm activated without delay or automatic activation occurs		(10)	7	4	0
Fire location communicated to other staff by public address system or other means		(10)	7	4	0
Staff reports to area of alarm origin to assist and search or begins assigned duties		(10)	7	4	0
Hallways, corridors, exit doors and all paths of egress cleared of obstructions		(10)	7	4	0
A staff person took charge and made assignments as necessary		(10)	7	4	0
All fire doors and other life safety equipment operated properly		(10)	7	4	0
Staff called 9-911 and Security 7045		10	(7)	4	0
Call from monitoring company to 911 – received_____ (within 2 minutes)		10	7	4	0
Time: Min___ Sec 46	Up to 4min =5 4:01 – 5:30 =2 >5:30 =0		5	2	0
Score – Add columns together and enter total				%	
(100-93-Very Good) (92-82-Good) (81-70-Acceptable) (69 and below – Unacceptable and will be redrilled)					

Lori Furr
Safety Committee Observer 1

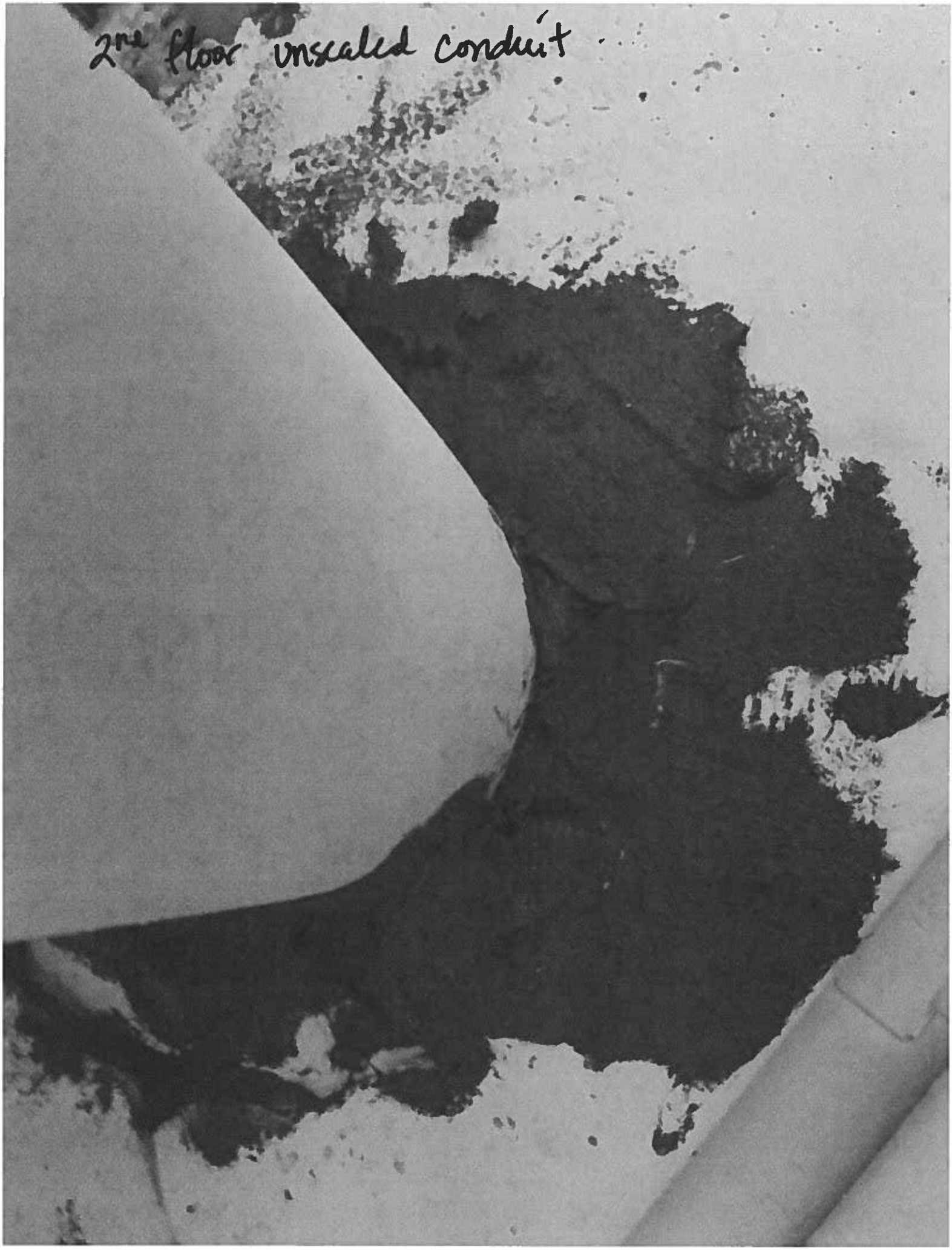
Safety Committee Observer 2

Comments:
Simulated fire drill on PT3 - "Fire" in Room 314. Staff responded quickly, removed residents from danger, closed doors, called 911 (forgot to call Security) pulled alarm. Needed reminder on where extinguishers are located. Did head count at conclusion of drill.

Tub Room Modification

Tub Room Modification


2nd floor hole in wall sealed.


2nd floor unsealed conduit