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
	HAL031016	A. BUILDING: 01 B. WING _____	10/19/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WALLACE GARDENS	1052 NE RAILROAD STREET WALLACE, NC 28466

(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 Suzanna Fay conducted on October 19, 2018. Records indicate that the Facility was first licensed on April 10, 1986 for Sixty-four (64) beds. Based on the above information, the facility is required to meet the 1984 Minimum Standards and Regulations for Homes for the Aged and Disabled; the applicable portions of the 2005 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirmed; and the 1978 North Carolina State Building Code (Revision 5); Section 409 Institutional Occupancy. Deficiencies were cited during the Survey and further action is required.	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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Observations revealed that the facility does not meet all the NC Fire Code requirements. Findings on October 19, 2018: a. The sprinkler riser is located in the Janitor's closet near the smoking porch exit. The fire department connection (FDC) was not identified nor was there signage directing the fire department to the connection.	C 101	(a) Fire department connection (FDC) is located outside by the driveway. The connection is painted in red with FDC signage attached.	10/19/18
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. Observations revealed that the corridors were not kept free of all equipment and other obstructions. Findings on October 19, 2018: a. Service Corridor - the exit was partially blocked by a washing machine, laundry bags, a laundry barrel and a clothes rack.	C 150	(a) Inservice staff - At no time exit doors are to be blocked.	10/19/18
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and	C 153	All items was removed from blocking exit door	10/19/18

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C 153	Continued From page 2 This Rule is not met as evidenced by: 1. Observations revealed that the outside entrance door hardware is not maintained easily operable. Findings on October 19, 2018: a. Exit at Smoking Porch - the exterior side of the door hardware is bent and loose.	C 153	(a). Exit door at smoking porch exterior side was replaced with new hardware	11/6/18
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on October 19, 2018: a. Smoking porch - the roof structure on the porch is rotting. The siding is falling off, the trim is rotting, the sheathing is rotting and there are holes in the roof. b. A section of the roof trim is bent and falling off of the building to the left of the exit outside of Room 1.1. Observations revealed that the fence was not maintained to be free of hazards. c. A section of the fence behind the South Hall	C 160	Smoking porch was pressure washed on 11/2/18 and cleaned. (a) CDW Watkins Roofing LLC repaire the roof structure. Siding and trim waiting for repairs: Estimate time November 27, 2018 (b) Roof trim was repaired to the left of the exit outside of room 1.1.	11/2/18 10/30/18 11/27/18 11/13/18

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C 160	Continued From page 3 has fallen over. Staff revealed that the fence had fallen during the storm and they had not removed it for insurance evaluation. 4" nails were sticking up in places along the entire length of the fence.	C 160	(c) Fence was repaired	10/22/18
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 floors are not kept clean and in good repair. Findings on October 19, 2018: a. Room 16 - the door drags on the floor and is damaging the floor tile. b. Community Bath across from Room 28 - there is a heavy mildew build-up in the grout joints along the tile base and lower wall of the shower. c. Room 6 - the vinyl tile and the tile joints around the toilet are heavily stained and there is a strong smell of urine in the bathroom. d. Room 25 - the door drags on the floor and is damaging the floor tile.	C 164	(a) Room 16 door repaired from dragging on floor tile. (b) In Service with Housekeeping use CLR to remove build up from mold. Meets US EPA Safer Product Standards. Hsking Supv. will Monitor monthly (c) Room 6 is being repaired with new flooring (d) Room 25 door repaired from dragging on floor tile	11/5/18 10/24/18 11/19/18 11/5/18
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189		

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C 189	Continued From page 4 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 October 19, 2018: a. The fire alarm panel was indicating a ground fault error. The fire alarm did appear to be working during the testing of the system. 2. 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 October 19, 2018: a. Main Living Room - the door drags at the latch plate making it difficult to close and latch. b. Room 27 - the door drags on the frame making it difficult to close. c. Laundry Room - there is a screw sticking out at the latch plate preventing the door from closing. d. Room 6 - the latch plate is loose and the door	C 189	(a) BFPE came out checked 10/23/18 fire alarm system to assure the system is working properly (a) Repaired latch plate to stop the door from latching and closing. 11/6/18 (b) Repaired room 27 from door dragging on the frame 11/6/18 (c) New latch plate was repaired for laundry door. 11/7/18 (d) Room 6 latch plate	

Rev #3 WL

BFPE INTERNATIONAL
FIRE·SAFETY·SECURITY

3300 Highway 421 North
Wilmington, NC, 28401
800-948-5489
BFPE.COM

SERVICE REPORT

Page: 1 of 1	Job # or Call Type: Trouble	Ticket Number: 1512854

Customer Name:	Service Req. By:	Call Taken By:	PO Number:
Wallace Gardens	Angela	BB	

Address:	System Type (Name, Model and Number):
1052 NE Railroad St.	FCI 7200

City:	State:	Zip:
Wallace	NC	28466

Contact Name/Phone Number: Angela 910-285-7881

- [x] Fire Alarm
- [ ] Standard
- [ ] Clean Agent
- [ ] Voice
- [ ] Security
- [ ] Multiplex
- [ ] Card Access
- [ ] Sprinkler
- [ ] Digital Dialer

Other:

System Problem:	Check fire alarm system
Service Performed:	Tested system while ground fault condition was on panel. All system functions and devices are working properly.

Ground fault is coming from door holder circuit board. Cleared ground fault by pressing on circuit board, system is now showing all normal.

Follow Up Required: No — If yes, please describe and list all equipment needed:

Equipment Used from Vehicle:

Quantity	Part Number	Part Description	Quantity	Part Number	Part Description

- [ ] System out of service
- [ ] System partially bypassed

Technician:	Date:
Mike D	10-23-18

Start time: 2:30pm	Finish time: 3:00pm	Print Customer Name:
Total time on site: .5hr	Total travel time: 1hr	

Signature constitutes acceptance of service performed as being satisfactory. If a service agreement exists between customer and BFPE, all work is subject to that agreement.

Customer Signature:

The service request has been made on the behalf of the fire protection system(s) or the fire protection equipment owner, or the owners dully appointed agent or representative. BFPE International takes no responsibility for, and assumes no liability for any flaws or deficiencies of existing fire protection system(s), fire protection equipment, wiring, and piping that was designed by, provided by, and/or installed by others. Customer releases BFPE International from any and all claims regarding the existing system and any damage or injury caused by or to the existing system. BFPE International makes no warranty as the quality of work performed as the quality of work performed by others, and cannot and does not guarantee that loss or

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C 189	Continued From page 5 drags on the frame. e. Room 3 - the latch is sticking so that the door does not always latch when closed. 3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on October 19, 2018: a. Main Living Room - the emergency light did not illuminate on test. b. The emergency light outside of Room 28 did not illuminate on test. c. Med Room - the emergency light did not illuminate on test. d. Nurses' Station - the emergency light did not illuminate on test. 4. 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 holes in the door or gaps between the door and the door frame stops. Findings on October 19, 2018: a. Room 15 - there is a hole through the door at the door hardware. b. Laundry Room - there are holes through the door at the door hardware. 5. 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	Repaired and Stop door from dragging. (e) Repaired room 3 latch from sticking so door can close. Due to some emergency lights being old, they was replaced with new ones. (a) Replaced emergency light in Main living room. (b) Replaced emergency light outside room 28 (c) Replaced emergency light in Med. Room (d) Replaced emergency light at Nursing Station (a) Repaired hole in room 15 door hardware. (b) Repaired hole in laundry room door hardware	11/7/18 11/7/18 10/30/18 10/30/18 10/30/18 10/30/18 11/2/18 11/2/18

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C 189	Continued From page 6 Findings on October 19, 2018: a. Room 14 - the fire caulk around the sprinkler head is coming out leaving a hole in the rated ceiling assembly. b. Room 1 - the fire caulk around the sprinkler head is coming out leaving a hole in the rated ceiling assembly. 6. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on October 19, 2018: a. Beauty Shop - the base for the spray nozzle is broken. 7. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Findings on October 19, 2018: a. Environmental Room - there was a heavy accumulation of dust on the vents. b. Laundry - the backflow preventor is missing at the exterior dryer exhaust. Pests can enter the facility through the open duct. 8. 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 suppress a fire. Findings on October 19, 2018: a. Central Supply - boxes and pillows are stacked to the ceiling. 9. Based on observation there is a failure to	C 189	(a) Room 14 was closed around sprinkler head with fire rating caulk. (b) Room 1 gap was closed around sprinkler head with fire rating caulk. (a) New base was ordered and repaired with fixtures for Beauty shop. (a) Environmental room vents was taken down and clean free of dust. (b) IN laundry room blackflow preventor was put on exterior dryer exhaust. (a) IN serviced Staff: When supplies are put up they can't be at the top of ceiling. Boxes and pillows was lowered from ceiling in Central Supply	11/2/18 11/2/18 11/13/18 11/8/18 10/24/18

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C 189	Continued From page 7 maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on October 19, 2018: a. The fire door by Central Supply did not close completely when the fire alarm was activated.	C 189	(a) Alarm door by Central Supply room was repaired to latch and close properly	11/14/18
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 did not maintain exhaust ventilation in required areas. Dirty or clogged vents prevent fans from exhausting at the required cubic feet per minute. Findings on October 19, 2018: a. Room 27 Bath - the fan has a heavy	C 199	Wet-Dry Vacuum was purchased to clean exhaust fans, and vents through out the facility once a month (a) Dust was clean out of room 27 bath	11/8/18

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C 199	Continued From page 8 accumulation of dust. b. Room 33 Bath - the exhaust fan is not working. c. Community Bath across from Room 28 - the exhaust fan is not working. d. Small Community Bath across from Room 27 - the exhaust fan is not working. e. The Biohazard Room has bleach and other chemicals stored in the room and there is not an exhaust fan.	C 199	(b) Replaced exhaust fan in room 33 bath. (c) Replaced exhaust fan in community bath across from room 28 (d) Replaced exhaust fan in small community bath across from room 27 (e) Chemicals was removed from Biohazard room and Stored in building outside	11/8/18 11/8/18 11/8/18 11/8/18