STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL070005	A. BUILDING: **01** B. WING _____	R **01/10/2019**

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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on January 10, 2019. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	{C 000}		
{C 116}	Plans Submittals and Approvals SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure. Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division. (d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained. (e) Completed construction or remodeling shall conform to the requirements of this Section	{C 116}		

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{C 116}	Continued From page 1 including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder. (f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion. This Rule is not met as evidenced by: 1. Observations revealed that the facility remodeled and did not submit plans to DHSR/Construction for review and approval. Findings on January 10, 2019: a. The Community Bath in the 300 Hall has been remodeled and converted into a maintenance office and storage room. The facility is in the process of converting the room back to a bath.	{C 116}		
{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;	{C 134}		

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{C 134}	Continued From page 2 (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 provide at least one bathroom opening off the corridor with a roll-in shower, an accessible bathtub, a lavatory and a toilet for 54 of the 76 residents. Findings on January 10, 2019: a. The Community Bath that opens off the corridor in the 300 Hall has been converted to use as a maintenance office and storage area. The only other Community Bath is in the SCU which is not accessible to the AL residents. The facility is in the process of converting the office back to a community bath.	{C 134}		
{C 135}	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Observations revealed that the facility is using a bathroom for purposes other than those indicated in the licensure rules. Findings on January 10, 2019: a. 300 Hall Spa - the spa has been converted to	{C 135}		

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{C 135}	Continued From page 3 use as a maintenance office. The facility is in the process of converting the maintenance office back to a bath.	{C 135}		
{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. Observations revealed that the life safety equipment was not maintained in a safe and operation condition. Exit doors that are blocked or are difficult to open are a danger to the residents, staff and visitors by obstructing egress in a fire or other emergency. Findings on January 10, 2019: a. Exit door by Room 212 - the exterior door has rotted making the hinge loose and the door was very difficult to open. The bottom of the door is rusting out as well as the hinges and the the sweep is falling out of the door creating an additional drag when opening. The door had to be special ordered and is scheduled to arrive today. b. Service Hall - the exterior door is heavily rusted on the exterior face and the door is difficult to open. The door has been ordered but has not yet come in.	{C 189}		

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{C 189}	Continued From page 4 2. 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. Findings on January 10, 2019: a. Service Hall - there is a small hole at the sprinkler head where the escutcheon plate has dropped. The escutcheon plate is still down. 3. Observations revealed that the building equipment was not maintained in a safe condition. Non-rated access panels in fire rated ceilings would fail to resist fire in the event of an emergency. Findings on January 10, 2019: a. Library - the access panel appears to be of a plastic material and is not secure to the ceiling leaving gaps in the rated assembly. This has not been corrected. Staff was not clear on what needed to be done. b. 300 Hall Parlor - the access panel is a plastic material not suitable for rated ceiling construction and the panel is sagging leaving a gap in the ceiling assembly. This has not been corrected. Staff was not clear on what needed to be done. 4. 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 January 10, 2019:	{C 189}		

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{C 189}	Continued From page 5 a. 100 Hall Laundry - the latch does not fully release so that the door does not latch. The latch does not engage the door catch. Staff thought that this was repaired.	{C 189}		
{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 exhaust ventilation was not maintained in required areas. Findings on January 10, 2019: a. Chemical Storage in the service corridor - the exhaust fan is not working and there is a chemical odor. Since the survey, there was a leak in the room and it is currently under renovation. The fan is not working but the odor is no longer an issue. Staff revealed that the odor had come from an unused drain trap at the utility sink.	{C 199}		