STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL078083	A. BUILDING: **01** B. WING _____	R **02/13/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RED SPRINGS ASSISTED LIVING	**1301 E. FOURTH AVENUE** **RED SPRINGS, NC 28377**

(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 Biennial Follow Up Construction Survey by Suzanna Fay conducted on February 13, 2019. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	{C 000}		
{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: 2. Observations revealed that the walls and floors are not kept clean and in good repair. Findings on February 13, 2019: a. C Hall Living Room - the carpet is worn, stained and buckling which creates a tripping hazard. Interview with staff revealed that the carpet has not been replaced because they are painting throughout the facility. The flooring will be done after the painting.	{C 164}		
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	{C 189}		

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{C 189}	Continued From page 1 (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 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 February 13, 2019: a. Observation at the time of survey revealed the facility was not equipped with the typical battery backed up emergency lighting. Staff indicated that the emergency lighting will be tied into the new generator. The new generator is installed, but currently not capable of providing the emergency lighting. The new generator must meet the requirements for an emergency generator or supply battery backed up emergency lighting. Note: Review of DHSR Construction Records indicated that there is no evidence the generator meets the requirements for an emergency generator therefore battery units are required. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.	{C 189}		

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{C 189}	Continued From page 2 Findings on February 13, 2019: a. Observation at the time of survey revealed the facility does not have battery backed up emergency exit lighting. Staff indicated the facility's exit signs/lights (with one exception) receive emergency power from the building generator. The facility has purchased a new generator. The new generator must meet the requirements for an emergency generator or supply battery backed up exit lighting. Note: Review of DHSR Construction Records indicated that there is no evidence the generator meets the requirements for an emergency generator, therefore battery units are required. 3. 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 gaps between the door and the door frame stops. Findings on February 13, 2019: a. A Hall Living Room - the door has been removed for repairs. b. Room B-12 - a new door was installed but is too large and drags on the floor so that it doesn't close. They were working on the doors at the time of survey.	{C 189}		