STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL047014	A. BUILDING: **01** B. WING _____	**04/03/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OPEN ARMS RETIREMENT CENTER	**612 HEALTH DRIVE RAEFORD, NC 28376**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay and Ed Miller conducted on April 3, 2019. Records indicate this facility was first licensed on February 2, 2001. The facility is currently licensed for 90 beds with a 22 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1999 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure	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; This Rule is not met as evidenced by:	C 101		

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C 101	Continued From page 1 1. Observations revealed that the facility was not in compliance with licensure and building code requirements in effect at the time of construction, addition or renovation. Special locking of electromagnetic locks are required to have an emergency release switch at each locked door and located within 3 ft of the door that does not depend on relays or other devices to interrupt power to the magnet. Findings on April 3, 2019: a. The override switches at the locked doors are momentary switches. Momentary switches relay on an electronic ciruit to temporarily interrupt power to the magnet.	C 101		
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 free of obstructions. Findings on April 3, 2019: a. SCU Janitor's Closet - the closer has been dismantled on the door. The door swings out into the corridor.	C 150		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS	C 164		

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C 164	Continued From page 2 (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 facility did not have furnishings kept in good repair. Findings on April 3, 2019: a. Room 31 - one of the knobs is missing from the closet door on the right. 2. Observations revealed that the facility did not have floors kept clean and in good repair. Findings on April 3, 2019: a. Room 35 - the floor is heavily scuffed between the first bed and the door. 3. Observations revealed that the facility was not maintained free of unpleasant odors. Findings on April 3, 2019: a. Room 42 - there is a strong, unpleasant odor of urine pervading the room.	C 164		
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	C 166		

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C 166	Continued From page 3 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 was not maintained free from hazards. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on April 3, 2019: a. Room 24 - there were three oxygen bottles sitting on the floor unsecured. There were four more oxygen bottles unsecured on the floor of the closet. b. Room 22 - there were six small oxygen bottles in a cardboard carrying case in the closet. 2. Observations revealed that the facility was not maintained free of hazards. Findings on April 3, 2019: a. Exit door by Room 30 - the end cap was missing from the pushbar on the door leaving metal edges exposed. Interview with staff revealed that they were having a difficult time finding replacement parts.	C 166		
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.	C 189		

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C 189	Continued From page 4 (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 April 3, 2019: a. Dining Room - the emergency light near the kitchen did not illuminate on test. 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. Findings on April 3, 2019: a. The exit sign outside of the Director of Resident Services office did not illuminate on battery test. b. SCU Porch - the exit sign did not illuminate on battery test. 3. Based on observation there is a failure to 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 April 3, 2019: a. Fire doors by Room 38 - the left leaf catches	C 189		

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C 189	Continued From page 5 on the right and does not latch when the alarm is activated. b. Fire doors by Nurses' Station - one of the door leaves is catching and does not latch when the alarm is activated. 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 April 3, 2019: a. Room 8 - the door does not latch when closed and the door was being held open with a laundry basket. b. Room 36 -the door does not latch when closed. c. Residential Laundry - the door does not latch when closed. d. SCU, Room 53 - the door does not latch when closed. 5. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on April 4, 2019: a. Townsend Hall - a wet floor sign was placed on the floor in front of the fire doors which might prevent the doors from closing during a fire alarm. The sign was moved at the time of survey.	C 189		

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C 189	Continued From page 6 b. Kitchen - food bins were placed under the overhead fire door at the pass-through preventing the door from closing in the case of a fire. The containers were moved at the time of survey. c. Dining - the door to the kitchen was propped open using a metal table. 6. 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 or walls could allow fire and smoke to spread beyond the area of origin. Findings on April 3, 2019: a. Jordan Hall - there is a small hole at the smoke detector outside of the shower room. b. Jordan Hall - there is a small hole in the ceiling at the nurse call light outside of Room 18. c. Jordan Hall - the ceiling fan outside of Room 2 is falling out of the ceiling leaving a hole at the ceiling. d. Townsend Hall attic access by Room 38 - there is a cable penetration in the fire wall above the fire doors. e. Porch outside of Room 30 - the escutcheon plate has dropped on the sprinkler head leaving a gap in the rated ceiling. f. Kitchen bathroom - the escutcheon plate has dropped on the sprinkler head leaving a gap in the rated ceiling. g. Kitchen vestibule - the escutcheon plate has dropped on the sprinkler head leaving a gap in the rated ceiling assembly. h. Bird Room Porch - the escutcheon plate has dropped on the sprinkler head leaving a gap in the rated ceiling assembly. i. Riser Room - there is a 1/2" hole in the ceiling behind the sprinkler pipes. One of the hanger rods is not sealed where it penetrates the ceiling.	C 189		

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C 189	Continued From page 7 There are two conduits and one cable bundled together that are not fire caulked where they penetrate the ceiling. j. Mechanical Room - there are three unsealed pipe penetrations to the left of the door. k. Mechanical Room - the sprinkler head escutcheon has dropped leaving a gap in the rated ceiling assembly. l. SCU - there is a small unsealed penetration where the cable for the override keypad enters the ceiling. 7. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain 18" clear below the sprinkler could effect the sprinkler system's ability to suppress a fire. Findings on April 4, 2019: a. There was a pattern of storing items to less than 18" below the sprinkler head in five of six storage rooms. 8. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on April 4, 2019: a. Business Office (Inner Office) - an extension chord was used to power the refrigerator. b. Training Center - extension chords were being used to power the equipment. c. Townsend Hall attic access by Room 38 - a junction box near the fire wall was missing the cover plate leaving wires exposed. d. Bird Room Porch - the outlet just outside the exit door was missing its weatherproof cover.	C 189		