STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL007014	A. BUILDING: **01** B. WING _____	R **04/11/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLARA MANOR	**1218 PAMLICO STREET** **WASHINGTON, NC 27889**

(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 4-11-2019. Some deficiencies were not corrected. 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; This Rule is not met as evidenced by: 1. Based on interview and observation, the facility does not meet the licensure and code requirements in effect at the time of construction or alteration as relates to 'Use and Occupancy'. Findings on March 6, 2019: Interview with facility staff revealed a non-Adult Care Resident (tenant) living in the private apartment. Observations revealed clothing and	{C 101}		

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{C 101}	Continued From page 1 other belongings in the apartment and staff acknowledged that this space was rented out. The occupant was not a resident of the facility, a staff member or an owner. Review of DHSR Construction records revealed this facility was designed and built in accordance with the 1967 NC State Building Code as Group D Institutional Occupancy. In order to be considered Institutional Occupancy, the 'private apartment' would have been approved for use only by live in staff, owner or other staff associated with the facility and responsible for the safety of residents. Finding on 4-11-2019: Interview with staff confirmed the tenant is still liviing in the facility and is not a staff member associated with the facility.	{C 101}		
{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:	{C 185}		

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{C 185}	Continued From page 2 1. Review of records revealed that the facility did not maintain records of the fire rehearsals. Findings on March 6, 2019: a. There was not a record of fire rehearsals conducted from July 2018 through December 2018. Finding on 4-11-2019; The only records available onsite for fire plan rehearsals were dated June of 2018 or before.	{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: 2. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment did not operate when needed to provide fire protection. Finding on 4-11-2019: Hot Water Heater Shed - there is a fire extinguisher sitting on the floor that was last inspected in 2005.	{C 189}		