STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL067016	A. BUILDING: 01 B. WING _____	03/20/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE HERITAGE OF RICHLANDS	148 COX AVENUE RICHLANDS, NC 28574

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on March 20, 2019. This facility was first licensed on 04/27/1988 for Twenty (20) Beds. A capacity increase to Twenty-Four (24) Beds was approved on or about September 22, 1989. On or about April 5, 1994, an addition was approved for licensure, increasing the Total Beds to Forty (40). Based on this information, we are requiring the original portion of the facility to meet the 1987 Homes for the Aged and Disabled Minimum standards and Regulations and the 1978 Edition of the North Carolina State Building Code, Section 409.1(c) Institutional, Unrestrained. The addition is required to meet the 1993 Rules for Licensing of Domiciliary Homes (Homes for the Aged and Family Care Homes) and the 1991 North Carolina State Building Code, Section 513. The entire facility is also required to meet the applicable portions of the 2005 North Carolina Rules for Adult Care Homes of Seven or More Beds. Deficiencies were cited that require a Plan of Correction.	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,	C 101		

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C 101	Continued From page 1 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 observation the facility failed to meet the provisions of the 1978 NC State Building Code which required sprinkler systems OR fire detecting devices be installed in all spaces. Findings on March 20, 2019: a. Entire Building -The smoke or heat detectors which were installed in the Attics, Bedrooms, Offices, Workrooms, Bathroom, Storage, Halls, etc., have been removed. b. Inspect the facility to insure that complete smoke detection is installed in the corridors. The detectors must be no more than 30 feet from each other and no more than 15 feet from any end wall. See Cross Reference at Tag C 116 and C 182]	C 101	BFPE who installed upgrade to present fire alarm system is working on obtaining required licensure requirements with construction. Section of Aurora Health Services Completion day is requested for maximum time frame allowed 45 days which would be May 15. If it does require time permit cannot be issued to allow completion of work. A waiver of sprinkler would be requested as attachment	
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	C 116		

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C 116	Continued From page 2 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 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 and interview with Administrator	C 116		

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C 116	Continued From page 3 revealed a new fire alarm system had been installed and construction documents were not submitted, and approval was not obtained from the Division and not all licensing requirements were maintained. Findings on March 20, 2019: a. Entire Building - the fire alarm system for the building has not been summited for review and approved by DHSR. [See Cross Reference at Tag C 101 and C 182]	C 116		
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. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on March 20, 2019: a. Left Side Exit - this side exit is blocked with a large trashcan positioned behind the door.	C 150	trash can was moved and placed on opposite area of exit. Can is utilized for removal of trash from building every shift and then to dumpster. Will be overseen by maintenance or other delegated employees for compliance.	3-20-19
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel	C 175		

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C 175	Continued From page 4 bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas, with the required individual towel bars for each resident. Findings on March 20, 2019: a. Bedrooms - there is no means to hang a towel in the Bedrooms or adjoining Bathrooms.	C 175	Paper towel dispenser is placed in all residents bathrooms for hand drying purposes. A individual towel hook has been placed on all residents individual closets to meet rule of accessibility of a towel and washcloth. This is to be monitored by each shift supervisor and other delegated staff as deemed by administrator	4-4-19
C 182	When Any Fac. Replaces Fire Alarm System SECTION .0300 - PHYSICAL PLANT 10a NCAC 13F .0307 FIRE ALARM SYSTEM (d) When any facility not equipped with a complete automatic fire extinguishment system replaces the fire alarm system, each bedroom shall be provided with smoke detectors. Other building spaces shall be provided with such fire detection devices as required by the North Carolina State Building Code and requirements of this Subchapter. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide the minimum fire alarm system required when replacing the fire alarm system. This could hamper the system's ability to detect and notifying all of fires. This would affect all by not identifying notifying all of fire emergencies. Findings on March 20, 2019: a. Entire Building - the fire alarm system was replaced recently and no smoke detector were installed in the bedrooms. [See Cross Reference at Tag C 101 and C 116]	C 182		

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C 189	Continued From page 5	C 189	Latch on door, 3-21-19 has been adjusted to allow door to latch when fire alarm hold open device is released. Will be ensured by maintaince with general preventive maintence checklist. See attached	
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. Based on observation, the Building was not maintained in a safe and operating condition, because the fire rated doors in a Firewall did not close completely and latch in order to contain smoke/fire. This could affect all residents, staff and visitors by not containing smoke/fire in the fire compartment of origin. Findings on March 20, 2019: a. Firewall, - both leafs of the cross-corridor double-egress doors did not latch when the fire alarm hold open devices released. 2. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on March 20, 2019: a. Firewall - when the fire alarm is activated, the hold open devices released their doors closing the openings in the firewall. When the fire alarm system was put into silence mode, these hold open devices reenergized, which allows the fire doors to be held open during an alarm. b. Fire Alarm Panel -the fire alarm panel is	C 189		

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C 189	Continued From page 6 showing a trouble signal. 3. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on March 20, 2019: a. Alcove near Office - there are gaps around two cable not firestopped as they penetrate the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. b. Main Electrical room - there is a surface attached patch (one layer of 1/4 inch plywood) to the one-hour fire-resistance-rated wall assembly using fasteners. The patch materials was removed, exposing an opening to the attic and the interior of the wall that is not firestopped. Provide the same fire-resistance-rated protection as the original ceiling/wall. c. Laundry - there is a gap around the cover plate of a junction box not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. d. Attic Smoke Barrier - there is a ¾-inch conduit with cable not firestopped around conduit and inside the conduit as they penetrate the fire-resistance-rated assembly. e. Kitchen - there is a gap at the exit sign base not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. f. Vending - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. g. Exit near Bedroom 206 - there is a gap	C 189	All area's will be maintained in future with monitoring of preventive maintenance checklist. Will be overseen by maintenance and kept in notebook for review. See attachment (B) All open area's exposed were sealed with fire rated protection a picture of corrections was taken and placed outside of plywood which was retaped in attic smoke barrier	[illegible] 3-21-19 3-21-19

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C 189	Continued From page 7 around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Deficiency corrected before Construction Surveyors departed site. 4. Based on observation the ice machine drain line was in direct contact with the floor drain. Ice machine drains that directly contact the floor or floor drain and that are less than a minimum of 2 inches of vertical clearance above the floor present the possibility of contamination of the ice machine. 5. Based on observation, the Building was not maintained in a safe and operating condition, because all of the corridor doors do not resist the passage of smoke. Corridor door must positively/automatically latch into their frame under normal closing force. This could affect all if the doors did not latch to contain smoke/fire in the room of origin. Findings on March 20, 2019: a. Med room - the top leaf of the Dutch door, did not automatically latch into the bottom leaf. 6. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on March 20, 2019: a. Living Room - the corridor door does not latch into its frame when closed. b. Vending - the corridor door hit the frame and will not close and latch with picking up the door, and closure arm in detached.	C 189	Removed down spout adjusted pipe to two inches to prevent possibility of contamination of ice machine. Will be overseen by maintenance during routine preventive oversight. A. Lock was added to bottom top of both doors would close as one Doors were readjusted by maintenance and will properly latch when closed. Will be included on preventive maintenance checklist See attachment (B)	3-22-19 3-22-19
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 191		

Attachment A

FW: Update on Lighthouse and Heritage - Fire Alarm

Vann Pierce <Vann@jvp-ent.com>

Wed 3/27/2019 10:28 AM

To:Gina Downes <gdownes@heritageofrichlands.com>; beverly@lh-village.com <beverly@lh-village.com>;

Gina & Beverly:

Attached is a communication, from Aaron at BFPE.

Thanks,

Vann Pierce

From: Aaron Lawrence <alawrence@bfpe.com>
Sent: Wednesday, March 27, 2019 10:11 AM
To: Vann Pierce <Vann@jvp-ent.com>
Cc: 'David McGlynn' <dmcglynn@bfpe.com>; bholmes@bfpe.com; bdonnelly@bfpe.com
Subject: Update on Lighthouse and Heritage - Fire Alarm

Vann,

Thank you for your patience on this. I've got several conversations currently going with the inspections departments and the state concerning your facilities. BFPE is working closely with them to make sure we are all on the same page as we move forward.

We are not yet 100% certain what will happen but in the end if we are required to install additional detection in the facilities, we will do it quickly and at no additional charge to you. Before this process can begin, our shop drawings will need to be reviewed by the state and the local AHJ in submittal for permit.

Please contact me with any questions or concerns, and if you don't hear from me by next week please message me.

Sincerely,

Aaron Lawrence
Fire Alarm Sales
Office: 910.762.5418
Cell: 910.431.1038
Fax: 910.762.9279

Attachment (B)

Hallways
Preventive Maintenance Program Checklist

_____
Location in Building

_____
Engineer's Initials

_____
Date

Legend
0 = paint
1 = repair
2 = replace
4 = ok

Hallway A	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Hallway B	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Signage					Signage				
Lighting					Lighting				
Exit Lighting					Exit Lighting				
Railings					Railings				
Switches/Covers					Switches/Covers				
Baseboards					Baseboards				
Doors					Doors				
Door Hardware					Door Hardware				
Door Frames					Door Frames				
Door Stops					Door Stops				
Fire Doors					Fire Doors				
Fire Door Hardware					Fire Door Hardware				
Fire Door Frame					Fire Door Frame				
Walls					Walls				
Floors					Floors				
Ceilings					Ceilings				
Fire pull stations					Fire pull stations				
Fire Horns					Fire Horns				
Hallway C					Hallway D				
Signage					Signage				
Lighting					Lighting				
Exit Lighting					Exit Lighting				
Railings					Railings				
Switches/Covers					Switches/Covers				
Baseboards					Baseboards				
Doors					Doors				
Door Hardware					Door Hardware				
Door Frames					Door Frames				
Door Stops					Door Stops				
Fire Doors					Fire Doors				
Fire Door Hardware					Fire Door Hardware				
Fire Door Frame					Fire Door Frame				
Walls					Walls				
Floors					Floors				
Ceilings					Ceilings				
Fire pull stations					Fire pull stations				
Fire Horns					Fire Horns				