STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL023046	A. BUILDING: **01** B. WING _____	**04/25/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHELBY MANOR	**1176 WYKE ROAD SHELBY, NC 28150**

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay and Ed Miller conducted on April 25, 2019. Records indicate this facility was first licensed on May 1, 1992 for 64 beds. On April 7, 2000, a change of capacity was approved increasing the total to 74 beds. Based on the above information, the facility is required to meet the 1991 Minimum Standards and Regulations for Homes for the Aged and Disabled, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds and the 1991 North Carolina State Building Code, Section 409.1 Group I-Unrestrained Occupancy Deficiencies were cited that require a Plan of Correction.	C 000		
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 kept free of equipment and other obstructions. Findings on April 25, 2019: a. Upper Level - there were a large number of dining style chairs being stored in the corridor by the front exit.	C 150		

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C 160	Continued From page 1	C 160		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on April 25, 2019: a. One of the globes has broken on the exterior light pole at the front drive.	C 160		
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: 1. Observations revealed that the furnishings and equipment were not kept clean and in good repair.	C 164		

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C 164	Continued From page 2 Findings on April 25, 2019: a. Four of five mechanical vents observed had heavy accumulations of lint and dust indicating a pattern of dirty vents. b. Apartment 29, Upper Level - one of the kitchen drawers to the left of the stove is broken. c. Apartment 26, Upper Level - two of the kitchen drawer faces were missing. 2. Observations revealed that the facility was not maintained free of unpleasant odors. Findings on April 25, 2019: a. Room 8 - there was a strong, unpleasant odor in the room. 3. Observations revealed that the ceilings were not kept clean and in good repair. Findings on April 25, 2019: a. A section of the ceiling, approximately 24" long by 12" deep, at the cross corridor doors near Room 8 was stained from a previous leak and the finish was flaking and peeling. b. The corridor ceiling outside of Dining was damaged when a sprinkler pipe burst. The facility is in the process of repairing the ceiling. c. Upper Level Boiler Room - the ceiling above the first water heater is damaged and stained. The sheetrock is dry, brittle and crumbles at the touch. 4. Observations revealed that the flooring was not maintained clean and in good repair. Findings on April 25, 2019: a. The carpet throughout the facility was heavily stained and worn. 5. Observations revealed that the walls were not	C 164		

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C 164	Continued From page 3 maintained in good repair. Findings on April 25, 2019: a. Apartment 29, Upper Level - the stove hood was removed and there is a large hole, approximately 4"x8" in the wall.	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 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 25, 2019: a. Room 6 - one oxygen bottle was unsecured on the floor of the room beside the oxygen rack. b. Oxygen Storage - one oxygen bottle was unsecured on the floor of the room. c. Room 21 - one bottle of oxygen was unsecured on the floor beside the oxygen rack and a second bottle was leaning unsecured against the wall at the window. 2. Observations revealed that the facility was not maintained free of hazards.	C 166		

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C 166	Continued From page 4 Findings on April 25, 2019: a. Room 30 - the carpet edges at the threshold to the room were beginning to unravel creating a trip hazard for the occupants of the room. 3. Observations revealed that the fire safety equipment was not maintained in a safe and operating condition. Findings on April 25, 2019: a. The two fire extinguishers in the upper level corridor had not been serviced sine February of 2018.	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. (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. 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 25, 2019: a. The exit sign by the C Hall Living Room was	C 189		

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C 189	Continued From page 5 not illuminated at the time of survey. b. The exit sign at the exit by Room 14 did not illuminate on battery test. 2. Observations revealed that the building electrical equipment was not maintained in a safe and operating condition. This is a potential hazard if receptacles near water sources do not function to provide shock protection. Findings on April 25, 2019: a. Room 1 - the GFCI outlet by the sink did not trip when tested. b. Exit by Room 51 - the exterior GFCI outlet did not trip when tested. c. The GFCI outlet at the HVAC equipment outside of the exit by Room 63 did not trip when tested. 3. 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 April 25, 2019: a. C Hall - there is a small hole at the base of the exit sign at the cross corridor doors by the Living Room. b. C Hall - there is a small hole at the base of the exit sign on the opposite side of the cross corridor doors by the Living Room. c. There is a small hole at the back side of the exit sign at Room 14. d. Corridor near Room 35 - a WIFI cable was installed along the ceiling. The penetrations into the ceiling were not sealed. This was typical for each corridor where the WIFI cable was installed. e. Clean Linen - there are two nail pops	C 189		

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C 189	Continued From page 6 penetrating the ceiling over the door. f. Laundry - there is an unsealed conduit penetrating the ceiling by the dryers. g. Upstairs Boiler Room - there are two unsealed penetrations a the corridor wall. There is a small hole in the ceiling over the first water heater where a bracket was removed. There is an unsealed copper wire penetration to the right of the first water heater. There is a partially sealed penetration over the data panel and there are several data wire conduits with open ends. h. Maintenance Director's Office - there is an unsealed WIFI cable penetration in the back corner of the office and there are two nail pops penetrating the ceiling on the right wall. 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 25, 2019: a. Room 21 - the corridor door did not latch when closed. 5. Based on observation there is a failure to install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping with a minimum 2" air gap could effect all occupants of the facility if the ice became contaminated. Findings on April 25, 2019: a. Kitchen - the icemaker drain line is resting directly on top of the floor drain. 6. Based on observation the facility's fire safety	C 189		

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C 189	Continued From page 7 components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin. Findings on April 25, 2019: a. Kitchen Pantry - the pantry door had a kick down installed on the door. b. Room 52 - the corridor door was held open using a wedged device. c. Food Service Director's Office - the door was held open using a wedged device. 7. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Findings on April 25, 2019: a. Attic Mechanical Room - the duct detectors has an accumulation of dust.	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	C 199		

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C 199	Continued From page 8 (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 the facility did not maintain exhaust ventilation in required areas. Findings on April 25, 2019: a. The exhaust system for the fans was not working in B Hall. b. Room 21 - the exhaust fan is not working in the resident's bathroom. c. Laundry Room - the exhaust fan is not working.	C 199		