

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL019006	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/25/2019
NAME OF PROVIDER OR SUPPLIER PITTSBORO CHRISTIAN VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 1825 EAST STREET PITTSBORO, NC 27312		
(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 Construction Section Biennial Survey by Ed Miller, conducted on June 25, 2019. Based on the information obtained from the DHSR Database, the Pittsboro Christian Village Facility was originally licensed, or the application submitted on 4-1-1980 as a 10-bed facility. Based upon this information, we are requiring that the original facility meet the 1977 "Regulations for Homes for the Aged and Disabled" Minimum Standards and Regulations; the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds; and the 1978 Edition of the North Carolina State Building Code, Volume I- General Construction- Section 409 - Institutional Occupancy A 16-bed addition was added to the facility with review from DHSR on 10-17-1990. Based upon this information, we are requiring that this portion of the facility meet the 1987 "Regulations for Homes for the Aged and Disabled" Minimum Standards and Regulations; the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds; and the 1978 Edition of the North Carolina State Building Code, Volume I- General Construction- Section 409 - Institutional Occupancy. A 14-bed addition was added to the facility with review from DHSR on 8-15-1995 and inspection approved on 5-16-1997. Based upon this information, we are requiring that this portion of the facility meet the 1994 "Regulations for Homes for the Aged and Disabled" Minimum Standards and Regulations; the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds; and the 1991 Edition of the North Carolina State Building Code, Volume I- General	C 000		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 000	Continued From page 1 Construction- 1995 Revision Section 409 - Institutional Occupancy. The facility is currently licensed for a total of 40 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, 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 Code requirements in effect at the time of construction or alteration by not having the proper means of egress or equipment. This could affect residents, staff and visitors if they cannot exit or exit quickly. Findings on June 25, 2019:	C 101		

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C 101	Continued From page 2 a. Courtyard - the paired-gate is secured shut with a gate latch on the outside. This latch does not allow egress without special knowledge. The building has an exit that discharges into the courtyard and there is no "safe dispersal area" within the courtyard so the gate must allow egress for all. Gate latch was relocated to inside. Deficiency corrected before Construction Surveyor departed site	C 101		
C 128	Bathrooms-Minimum Facilities SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (1) Minimum bathroom and toilet facilities shall include a toilet and a hand lavatory for each 5 residents and a tub or shower for each 10 residents or portion thereof; This Rule is not met as evidenced by: 1. Based on observation, counting and interview with Administrator and Executive Director, the facility failed to maintain the minimum plumbing fixture count to resident ratio required by the Rule. This deficiency affects all who must wait to have access to these fixtures. Findings on June 25, 2019: a. The facility has 1 tub and 2 showers between two Bathroom Groups. This accommodates the 23 residents noted as their census for that day. It does not accommodate the Licensed capacity of 40.	C 128		
C 164	Housekeeping and Furnishings-Clean, Repaired	C 164		

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C 164	Continued From page 3 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. Based on Observation, and interview with Manager, the facility failed to keep plumbing system devices clean and in good repair. Findings on June 25, 2019: a. Bedroom 207 Half-Bath - the connection of the commode to the floor is loose. Deficiency corrected before Construction Surveyor departed site.	C 164		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, and interview with Executive Director the facility failed to provide electrical outlets in wet locations at sinks, and bathrooms with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on June 25, 2019:	C 188		

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C 188	Continued From page 4 a. Bathrooms - the electrical power receptacles that are within six feet of sinks, tubs showers do not provide ground fault protection.	C 188		
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 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 or compartment of origin. Findings on June 25, 2019: a. Attic - the smoke barrier wall has a cable penetration not firestopped as it penetrates the fire-resistance-rated ceiling assembly. b. 200 Hall Mech Room near Ice Machine - there is a gap around a conduit not firestopped as it penetrates the fire-resistance-rated ceiling assembly. c. 200 Hall Attic - the tunnel style fire-resistance-rated ceiling construction has several holes on the attic side. 2. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on June 25, 2019:	C 189		

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C 189	Continued From page 5 a. Laundry - the corridor door hits the vinyl transition strip on the floor preventing it from closing and latching. 3. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on June 25, 2019: a. Meeting Room - the corridor door has a chair holding the door open. Deficiency corrected before Construction Surveyor departed site.	C 189		