

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018018	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/02/2019
NAME OF PROVIDER OR SUPPLIER HERITAGE CARE OF CONOVER		STREET ADDRESS, CITY, STATE, ZIP CODE 3430 LESTER STREET CONOVER, NC 28613		
(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 Biennial Construction Survey report by Frank Strickland conducted on 08/02/2019: This facility was licensed on 09/01/1985 as a Home for the Aged for 60 BEDS.. Based on this information, this facility was surveyed using the 1984 Minimum Standards and Regulations for Homes for the Aged and Disabled, the 1978 NC State Building Code and the applicable portions of the current Rules for Adult Care Homes of Seven or More Beds. Deficiencies have been cited and a Plan of Correction is required.	C 000		
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 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, this facility has not provided each resident with an individual towel bar. Findings on 08/02/2019: All of the resident romms do not have the required number of resident towel bars:	C 175		

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

TITLE

(X6) DATE

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C 189	Continued From page 1	C 189		
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, this facility has not maintained the building equipment in a safe and operating condition. Findings on 08/02/2019: There is a plywood attic access panel located in the Electrical Equipment Room that is not fire-rated attached to the one-hour fire-rated roof/ceiling assembly. 2-Based on observation, this facility has not maintained the building equipment in a safe and operating condition. Findings on 08/02/2019: The perimeter sheet-rock ceiling construction does not fit flush to adjacent wall construction that would allow the passage of fire and/or smoke located in the Electrical Equipment Room. 3-Based on observation, this facility has not maintained the building equipment in a safe and operating condition. Findings on 08/02/2019:	C 189		

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C 189	Continued From page 2 There are electrical conduit ceiling penetrations in the Electrical Equipment Room that have incomplete fire protection. 4-Based on observation, this facility has not maintained the building equipment in a safe and operating condition. Findings on 08/02/2019: The water heater pressure relief valve does not have piping that extends to 6" above the finished floor. 5-Based on observation, this facility has not maintained the building equipment in a safe and operating condition. Findings on 08/02/2019: The following locations have toilets that are not secured to the floors: (a) Tub Bath/Men's Hall (b) Guest Women's Bathroom/Middle Hall	C 189		