STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034016	A. BUILDING: **01** B. WING _____	**12/11/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VIENNA VILLAGE	**6601 YADKINVILLE ROAD PFAFFTOWN, NC 27040**

(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 Construction Section Biennial Survey by Dennis Harrell and Ed Miller on 12-11-2019; Records indicate the middle portion of this facility was first licensed or submitted as a Home for the Aged on 3-1-1966. Therefore the middle of the facility must meet the 1967 NC State Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. The right end of the facility was built in 1985 and therefore must meet the 1978 NC State Building Code, the 1984 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. The left end of the facility was built in 2009 and must meet the 2006 NC State Building Code and the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds. The facility is currently licensed for 90 residents. Deficiencies were cited which will require a Plan of Correction.	C 000		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: Based on observation, there was no hand grip provided at the toilet in room B56.	C 133		

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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, corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings on 12-11-2019; a. One of the fire doors near exit S-7 would not consistently close completely and latch when activated by the fire alarm system. b. The door to the West Dining room did not latch when closed. c. The door to utility room F53 did not latch when closed. d. The door to room F40 does not fit the opening properly to be resistant to the passage of smoke. e. The door to room F65 does not fit the opening properly to be resistant to the passage of smoke. f. The door to bedroom F56 was propped open. Note; This deficiency was corrected during the survey. 2. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised	C 189		

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C 189	Continued From page 2 in locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings on 12-11-2019: a. Unsealed sleeve in the ceiling of S30 electrical room, b. Unsealed penetrations (2) in the ceiling of S30 electrical room, c. Unsealed penetration in the ceiling of F35 electrical room, d. Gypsum compound and tape falling off the ceiling at the exit near room E2. e. Ceiling damaged (nail pops) in clean linen B20. 3. Based on observation, the facility was not maintained in a safe condition because of an improperly mounted light fixture. Finding on 12-11-2019; The light fixture was falling away from the ceiling in room F53. 4. Based on observation, plumbing equipment drain lines were not maintained in a safe condition. Ice machine drain lines that are not maintained at least 2 inches above the floor or floor drain, as required by Code, could cause the ice to become contaminated. Findings on 12-11-2019; The ice machine drain line extended into the floor drain. 5. Based on observation, an electrical outlet expander was in use in the corridor near room B73. Electrical outlet expanders are not approved for use in Institutional Occupancies. 6. Based on observation, the facility was not	C 189		

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C 189	Continued From page 3 maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability of the fire sprinkler system to extinguish a fire. Findings on 12-11-2019; a. Items had been stacked all the way to the ceiling in room B63. Note; This deficiency was corrected during the survey. b. Boxes had been stacked to within 7 inches of the ceiling in the pantry. Note; This deficiency was corrected during the survey.	C 189		