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	HAL084004	A. BUILDING: **01** B. WING _____	**12/04/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING ARBOR OF ALBEMARLE	**315 PARK RIDGE ROAD ALBEMARLE, NC 28001**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on December 4, 2019. Records indicate this facility was first licensed as a Home for the Aged serving 78 residents on 10-27-1997. Therefore, the facility must meet the 1996 Rules for Adult Care Homes, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds and the 1996 North Carolina State Building Code Section 409.1 Group I -Institutional Occupancy- Unrestrained. 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:	C 101		

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C 101	Continued From page 1 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the required procedures to properly operate doors equipped with Special Locking Arrangements. This could delay evacuation in an emergency. Findings on December 4, 2019: a. MCU Exits - 1 of 4 staff interviewed has a key to operate the on/off emergency release switches at the unit's exit doors. This is not in accordance with the NC State Building Code requirement that if on/off emergency release switches are of the keyed type, then all staff responsible for evacuation of the locked unit must carry emergency release switch keys. b. MCU Exits - 4 staffs were interviewed, and none had knowledge of how to operate the on/off emergency release switches at the unit's exit doors, or the central on/off emergency release switch.	C 101		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, and interview with Business Manager and Maintenance Director the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on December 4, 2019:	C 111		

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C 111	Continued From page 2 a. The current Fire Alarm Test and Inspection in accordance with NFPA 72, National Fire Alarm and Signaling Code, is not available for review by the Surveyor.	C 111		
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 December 4, 2019: a. MCU Back Left Vestibule - this vestibule has been turned into an Activity Room & Office with desk chairs, carts and combustible storage obstructing the required six feet width corridor to about three feet.	C 150		
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.	C 164		

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C 164	Continued From page 3 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. Without the proper air gap, contaminated water from the drainage system could back flow up into the ice machine. Findings on December 4, 2019: a. MCH Service Kitchen - the ice machine drain line exit port is only 1/4-inch above the drainage system device, less than the minimum 2-inches of vertical clearance needed.	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 mechanical systems, the facility failed to provide an environment free of hazards. This could affect all residents, staff and visitors, if equipment in disrepair injured someone. Findings on December 4, 2019: a. AL Employee Lounge Half Bathroom - the exhaust fan grille is not secured to the ceiling. 2. Based on Observation, a hazard is present	C 166		

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C 166	Continued From page 4 due to the possibility of the backflow of contaminated water into the domestic water supply. Findings on December 4, 2019: a. MCU Housekeeping Closet - the utility sink has a hose long enough to reach gray water and is not equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing lines.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with Business Manager and Maintenance Director, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on December 4, 2019: a. In the 3rd quarter for the last 12 months, no rehearsal occurred during 3rd shift. b. In the 4th quarter for the last 12 months, no rehearsal occurred during 2nd shift.	C 185		

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C 185	Continued From page 5 2. Based on Record review of the last 12 months of rehearsals, the Facility failed to provide a short description of what the rehearsal involved. Findings on December 4, 2019: a. The most of rehearsal records did not provide a short description of what the rehearsal involved.	C 185		
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, the facility failed to provide electrical outlets in wet locations at sinks, with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on December 4, 2019: a. AL Dining - an electrical power receptacle is within six feet of a sink and is not ground fault protected.	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)	C 189		

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C 189	Continued From page 6 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, and interview with Maintenance Director 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 December 4, 2019: a. Fire Alarm Panel - the fire alarm panel is showing a trouble signal, remote sync fault. Panel indicated this trouble signal has been showing for about two weeks. 2. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on December 4, 2019: a. AL Sun Room - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. b. AL Front Entrance - the exit sign does not illuminate on backup power when tested. c. AL Corridor near Bedroom 107 - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. d. AL Dining Exterior Exit - the exit sign does not illuminate on backup power when tested. e. AL Kitchen - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. f. MC Main Entrance - the exit sign/emergency light combination unit does not illuminate on backup power when tested. g. MCU Corridor near Bedroom 5 - the wall-mounted self-contained emergency light did	C 189		

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C 189	Continued From page 7 not illuminate on backup power when the test button is pushed. 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 December 4, 2019: a. AL Sun Room Mech Room Closet - there is a flue without a collar or firestopping as it penetrates the fire-resistance-rated ceiling assembly. b. MCU Back Left Vestibule - there is a gap at the base of the exit sign not firestopped as it penetrates the fire-resistance-rated ceiling assembly. 4. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on December 4, 2019: a. AL Activity - coordinators for the pair of corridor door's, are not adjusted to close the door leaves in the proper sequence, so they can close and latch. b. AL Dining - the pair of doors to the corridor do not latch when closed. c. MCU Bedroom 406 - the corridor door does not latch into its frame when closed. 5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on December 4, 2019: a. AL Therapy - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. b. AL Executive Director Office - an extension cord is being used to power office equipment. Extension cords cannot substitute for permanent	C 189		

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C 189	Continued From page 8 wiring. 6. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the room of origin. Findings on December 4, 2019: a. AL Corridor near Bedroom 118 - the escutcheon plate on the fire sprinkler has dropped from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. Deficiency corrected before Construction Surveyors departed site. 7. Based on observations, the Building is not being maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler discharge pattern cannot reach all areas of a room. Findings on December 4, 2019: a. Bedroom 206 - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. Deficiency corrected before Construction Surveyors departed site. b. AL Executive Director Storage Room - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. 8. 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 December 4, 2019: a. AL Kitchen - the Dining door has a wedge	C 189		

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C 189	Continued From page 9 holding the door open. b. MCU Med Room - the corridor door has a wedge holding the door open.	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 (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. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in rooms required to be mechanically exhausted. Findings on December 4, 2019: a. AL Bedroom 115 Bathroom - the required exhaust ventilation system does not work. b. AL Bedroom 110 Bathroom - the required exhaust ventilation system does not work. c. AL Employee Lounge Half Bathroom - the required exhaust ventilation system does not work. d. AL Bio Haz in Laundry - the required exhaust ventilation system does not work.	C 199		

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C 199	Continued From page 10 e. AL Hopper Room - the required exhaust ventilation system does not work.	C 199		