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	HAL049033	A. BUILDING: **01** B. WING _____	**12/04/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MILL CREEK MANOR	**1902 ORA DRIVE STATESVILLE, NC 28625**

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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 on 4-2-1990 as a HA and an addition of a Special Care Unit was licensed on 5-12-1994. This facility is currently licensed for 80 Beds including a 28 Bed Special Care Unit. Therefore, this facility was surveyed for conformance with the 1987 Rules for Adult Care Homes, the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and the 1978 and the 1991 Edition, of the North Carolina Building Code(s), Institutional Occupancy. Deficiencies were cited that require a Plan of Correction.	C 000		
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 Manager 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: a. The current Fire and Building safety Inspection (Fire Marshal) Report is not available for review by the Surveyor. b. The current Building Sanitation Inspection	C 111		

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C 111	Continued From page 1 Report is not available for review by the Surveyor. c. The current Kitchen Sanitation Inspection Report is not available for review by the Surveyor. d. The current Fire Alarm Annual Inspection and Test in accordance with NFPA 72, National Fire Alarm and Signaling Code , is not available for review by the Surveyor. e. The current Annual Fire Sprinkler System Inspection, Testing, and Maintenance Report in accordance with NFPA 25, is not available for review by the Surveyor.	C 111		
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: 1. Based on observation, the facility failed to provide all showers accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on December 4, 2019: a. Original Building Bedroom Bathrooms - the showers do not have hand grips (grab bars).	C 133		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT	C 150		

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C 150	Continued From page 2 (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, the exit pathways 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. Original Building Dining Room Courtyard - there is an unattended chair, obstructing access to the exit gate. Deficiency corrected before Construction Surveyors departed site. b. Original Building Dining Room Courtyard - the exit gate can only swing open to about 45 degrees of the required 90 degrees. c. SCU Courtyard - the exit gate is blocked with 10 plus landscape edging stones positioned behind the gate. This prevents the gate from being opened. Deficiency corrected before Construction Surveyors departed site. d. Original Building near Activity Room - there are two unattended chairs, obstructing access to the exit door. e. Basement Stairway - this space is being used to store chairs, toilets, tables, equipment, and supplies.	C 150		
C 154	Entrances/Exits-Wanderer Alarms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door	C 154		

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C 154	Continued From page 3 accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide exit doors that are accessible by residents equipped with sounding devices that activated when the door opens. Findings on December 4, 2019: a. SCU Courtyard - this "Special Locking System" gate has a non-working alarmed protective cover over the emergency release switch. This allows residents unrestricted access to the switch that unlocks that exit. In addition, the exit had no other notification device. b. SCU Fire Wall Entrance - this "Special Locking System" door has a non-working alarmed protective cover over the emergency release switch. This allows residents unrestricted access to the switch that unlocks that exit. In addition, the exit had no other notification device. c. SCU Dining Room Exterior Exit - this "Special Locking System" door has a non-working alarmed protective cover over the emergency release switch. This allows residents unrestricted access to the switch that unlocks that exit. In addition, the exit had no other notification device.	C 154		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL	C 160		

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C 160	Continued From page 4 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. . Based on observation, the outside grounds are not maintained in a clean and safe condition. Findings on December 4, 2019: a. Sidewalks between SCU Gate and Basement Entrance - there are several concrete sidewalks that have moved independently of each other, creating a one-inch difference in their surfaces. This surface difference is creating a tripping hazard.	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. Based on Observation, the facility failed to have furniture kept clean and in good repair. Findings on December 4, 2019: a. Original Building Corridor near Bedroom 1 - the textured ceiling is detaching from the ceiling in several areas.	C 164		

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C 164	Continued From page 5 b. SCU Activity Room Porch - the textured ceiling is detaching from the ceiling in several areas. 2. Based on observation, the building Floors are not kept clean and in good repair. Findings on December 4, 2019: a. SCU Corridor near Bedroom 40 - there is a broken hard tile at the corridor door. 3. Based on observation, the building walls are not kept clean and in good repair. Findings on December 4, 2019: a. Original Building Bedroom 1 Bathroom - there are holes in the wall were a light fixture was replaced. b. Original Building Bedroom 1 Bathroom - the bathroom door is not secured to the wall. 4. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on December 4, 2019: a. Entire Building - the ventilation system throughout the Facility have an excessive accumulation of dust/lint.	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.	C 166		

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C 166	Continued From page 6 This Rule is not met as evidenced by: 1. Based on Observation, the Building was not maintained free of hazards, if compress gas cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on December 4, 2019: a. Original Building Bedroom 5 - four portable oxygen cylinders are standing up on the floor not physically secured in racks, stands or chained to the structure. b. Original Building Bedroom 5 - a portable medical oxygen cylinder with regulator extending beyond its collar guard is standing up on the floor not physically secured in a rack, stand or chained to the structure. c. Original Building Chart Room - one portable oxygen cylinder is standing up on the floor not physically secured in a rack, stand or chained to the structure. d. Basement Living - there are a lot of portable oxygen cylinders standing up on the floor not physically secured in racks, stands or chained to the structure.	C 166		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and	C 183		

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C 183	Continued From page 7 associated equipment. This could hamper staff's ability to extinguish a small fire and permit it to grow larger. Findings on December 4, 2019: a. .Original Building Kitchen- since the last annual maintenance, performed in February 2019, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections since April.	C 183		
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 Manager, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on December 4, 2019: a. For the last 12 months, there was no records for review.	C 185		
C 189	Building Equipment Maintained Safe, Operating	C 189		

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C 189	Continued From page 8 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 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. Original Building Exterior Exits - the remote headlights on the emergency lighting system do not illuminate on backup power when tested. b. Original Building Kitchen - the exit sign to the Dining room have both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit, but the way out is straight. c. Original Building Corridor outside SCU Courtyard - the ceiling mounted exit sign, has no chevron directional indicators punch-outs removed, to direct you to the courtyard. d. SCU Stairway between Levels Landing - the exit sign is not illuminating on normal power. 2. Based on observation, the Building was not maintained in a safe and operating condition, by not maintaining the fire and smoke resistance of doors to Stairways. This could affect all if fire can enter the Stairways.	C 189		

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C 189	Continued From page 9 Findings on December 4, 2019: a. Basement Stairway - the exit door is blocked open with a rock. 3. Based on observation, the Building was not maintained in a safe and operating condition, by failing to ensure that egress from all areas can be done without the use of keys, tools or, special knowledge or effort. This could affect some staff and visitors if someone becomes trapped inside. Findings on December 4, 2019: a. SCU Activity Room Porch - the exterior door has a lock that lets you out then locks behind you. This could trap a person on the porch as the porch has iron bars on the opening. 4. 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. Original Building Fire Wall near Bedroom 14 - on both sides of the wall there are gaps at the bases of the exit sign not firestopped as they penetrate the fire-resistance-rated ceiling assembly. b. Original Building Bedroom 1 Bathroom - there are holes where light fixtures were replaced and not firestopped as they penetrate the fire-resistance-rated ceiling assembly. c. Original Building Receptionist Office - there are gaps around two cables and several cable bundles not firestopped as they penetrate the fire-resistance-rated ceiling assembly. d. Original Building Water Heater Room near Kitchen - there is a PVC pipe not firestopped as it penetrates the fire-resistance-rated ceiling assembly. e. Original Building Activity Room - there are many holes where light fixtures were replaced	C 189		

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C 189	Continued From page 10 and not firestopped as they penetrate the fire-resistance-rated ceiling assembly. 5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on December 4, 2019: a. Original Building Public Haft Bath near Executive Directors Office - the ground-fault circuit-interrupter (GFCI) electrical power receptacle does not have electrical power, therefore it cannot be tested for ground fault. b. Original Building Public Haft Bath near Executive Directors Office - over the sink, a four-bulb incandescent light fixture has two bulbs. By not having, bulbs in the sockets this allows access to energized components that are not guarded against accidental contact. d. Basement Bathroom - a ground-fault circuit-interrupter (GFCI) electrical power receptacle is missing its cover plate. 6. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on December 4, 2019: a. Original Building Bedroom 12 - the corridor door has a ½ inch gap between the face of the door leaf and the header stop. This excess the allowable gap by ¼ inches for non-sprinklered buildings. b. Original Building Shower Room across from Bedroom 22 - the corridor door has broken veneers around the door handle and the door handle is not secured in the door, creating a gap through the door. c. Original Building Bedroom 29 - the corridor door does not latch into its frame when closed. d. SCU Bedroom 40 - the corridor door does not	C 189		

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C 189	Continued From page 11 latch into its frame when closed. 7. 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. Basement Maintenance Office Closet - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 failed to prevent the use of portable electric heaters in an Adult Care Home. This could affect all if heater is the ignition source of a fire. The danger increases if used by resident or combustible material is near. Findings on December 4, 2019: a. Original Building Executive Director	C 191		

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C 191	Continued From page 12 Administrator Office - a portable electric heater was found in this room. b. Basement Maintenance Office - a portable electric heater was found in this room.	C 191		
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. Original Building Bathroom near Hopper Room - the required exhaust ventilation system does not work. b. Original Building Hopper Room - the required exhaust ventilation system does not work. c. Original Building Laundry Room - the required exhaust ventilation system does not work.	C 199		

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C 199	Continued From page 13 d. Original Building Laundry Room Linen Closet - the required exhaust ventilation system does not work. e. SCU Spa - the required exhaust ventilation system does not work.	C 199		