

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL045123	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/27/2019
NAME OF PROVIDER OR SUPPLIER HERITAGE HILLS A PACIFICA SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 2500 HERITAGE CIRCLE HENDERSONVILLE, NC 28791		
(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 on 12-27-2019. Records indicate this facility was first licensed on 2-21-1994 for 24 beds. The entire facility was converted to a Special Care facility on 6-22-2010. Therefore the facility must meet the 1993 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds, and the 1991 North Carolina State Building Code (1994 Revision), Section 409.1 Group I- Unrestrained Occupancy.	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: Based on observation and interview, some staff were not aware of the location or the use of the required emergency release switches located at	C 101		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 the exit doors for the Special (magnetic) Locking. All staff responsible for evacuation in an emergency must be properly trained in evacuation procedures and equipment.	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: Based on review of documents, required reports were not available in the home for review. Findings include the following missing reports: a. Fire and building safety inspection report, b. Fire alarm inspection, c. Sprinkler system inspection, d. Current sanitation reports for the building and kitchen.	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: Based on observation, the corridor was not maintained free of obstructions. At least 6 feet of clear width must be maintained in exit corridors. Finding on 12-27-2019:	C 150		

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C 150	Continued From page 2 There were shelves and a chair stored in the exit corridor from Zone 1 K reducing the clear width to about 3.6 feet.	C 150		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL 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: Based on observation, an exterior exit path was not maintained clean and free of obstructions. Finding on 12-27-2019; The exterior exit path from Zone 1 K was very obstructed with bushes, trash, building materials and a damaged fence.	C 160		
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	C 185		

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C 185	Continued From page 3 facilities. This Rule is not met as evidenced by: Based on a review of documents, records were not available onsite for the rehearsals of the fire plan. Records must be maintained and available for review.	C 185		
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, the required emergency release switches at the locked exits were of a type with a hammer provided to break the glass to open the exit door. The glass had been broken on the switch at the exit near Zone 1 K. The broken glass had been replaced with a metal washer that cannot break and release the lock. The improperly modified switch could prevent an evacuation in an emergency. 2. Based on observation, many 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	C 189		

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C 189	Continued From page 4 the remainder of the facility. Findings on 12-27-2019; a. The double doors to the dining room latch to each other but not to the frame when closed. b. The double doors to the living room latch to each other but not to the frame when closed. c. One of the double doors to the living room would not close completely. d. There was a hole at the latchset through the door to room I. e. There was a hole at the latchset through the door to the Spa. f. The latchset strike was missing on the door to the electrical room near room R. 3. Based on observation, the sampling tubes for the duct mounted smoke detectors in the "Mechanical Room" were dirty. Sampling tubes that are not periodically inspected and cleaned can endanger all residents and staff because the duct detector may fail to operate properly. 4. Based on observation, the battery powered emergency light in the med room would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. 5. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised in several 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 12-27-2019: a. Holes (2) in the ceiling of the "Electrical" room, b. Sprinkler escutcheon missing in the "Electrical" room.	C 189		

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C 189	Continued From page 5 6. 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. Finding on 12-27-2019; The ice machine drain lines (2) extended into the floor drain.	C 189		