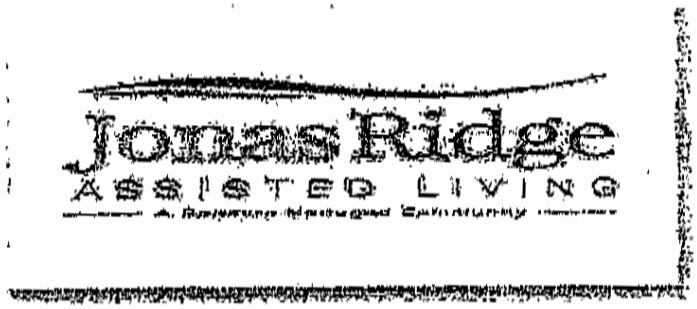

Jonas Ridge Assisted Living
PO Box 338
Jonas Ridge, NC 28641
PHONE: (828)733-2224
FAX: (828)733-2229

TO: DHSR Construction Section FROM: Christina Childress

FAX: 919-733-6592 PAGES: 7

PHONE: DATE: 7/14/23

Re: Plan of Correction CC:

O URGENT O FOR REVIEW O PLEASE COMMENT O PLEASE SIGN O PLEASE RECYCLE

ADDITIONAL COMMENTS:

If you do not receive all pages indicated, please call our office as soon as possible.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL012040	A. BUILDING: 01 B. WING _____	06/06/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JONAS RIDGE ADULT CARE	9051 HWY 181 JONAS RIDGE, NC 28641

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay conducted on June 6, 2023. Records indicate this Facility was first licensed on January 8, 1979 and an addition to the building was completed in 1982. Another addition was completed in 1986 for a total capacity of 57 residents. Therefore, the original facility and the first addition are required to meet the 1977 Minimum and desired Standards and Regulations for Homes for the Aged and Infirmed and the second addition to meet the 1984 Minimum Standards and Regulations to Homes for the Aged and Disabled. The entire facility is required to meet the applicable portions of the 2005 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirmed and the 1978 North Carolina State Building Code, Section 409.1(c), Institutional (I) Occupancy-Unrestrained, Group I-2. Deficiencies were cited which will require a plan of correction.	C 000	C111- See next email with text that I sent to Anna Watkins with Burke County - unable to provide date of completion though notification was made C132 - Contractor contacted to install stalls and stated they would come out to complete measurements by 7/19/23 depending on lead time of materials will try to have installed by 8/11/23 C164 - See Below a. Restroom by Room 102- the ceiling is spalling and has yellow water stains where the ceiling has bubbled and is flaking b. Room 204- the sheetrock ceiling along the side wall is bowing. There are yellow water stains in both corners of this wall and there is a black mildew stain at the exterior corner. c. Bath across from Room 208- the ceiling over the shower is spalling C 166 - See Below a. 200 Hall Mechanical Room- there are cardboard boxes stacked in front of the electrical panel b. Exit across from 206- there is a panel covering an opening in the floor. The panel does not sufficiently cover the opening leaving a 2" x 8" hole in the floor C 189 - See Below a. Maintenance Office- there is an unsealed cable bundle at the data equipment rack. b. 200 Hall Mechanical Room- there is a hole in the ceiling. Repaired 6/8/23 The electrical panel has been forced back into the walls leaving holes in the wall at the bottom of the panel and along the sides.	Notified 7/6/23 To be completed by 8/11/23 Repaired 6/7/23. Repaired and Painted 7/10/23 Repaired 7/12/23 Repaired 7/10/23. Repaired 7/6/23 Repaired 6/7/23 To be repaired 7/18/23
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. Review of records revealed that the facility does not have current sanitation inspection reports maintained in the home and available for review.	C 111		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Christina B Childress | TITLE: ADMINISTRATOR | (X6) DATE: 7/14/23

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C 111	Continued From page 1 Findings on June 6, 2023: a. The most recent Building Sanitation Inspection Report is dated July 19, 2019.	C 111	C 189 (cont) See Below c. 200 Hall- the cover plate for the exit sign base is missing at the exit sign by the Bathroom leaving small gaps in the fire-resistant rated ceiling d. Exit by 206- there is an unsealed wire penetration over the door. e. Resident Laundry- there is an unsealed conduit penetration in the ceiling at the back wall. f. 300 Hall- there are at least five cable bundle or conduit penetrations that are not sealed properly where they penetrate the fire wall. 2a. Room 214- Door does not latch C 199 a. Visitor's Bathroom- The exhaust fan is not working - Will replace fan and repair.	To be repaired 7/18/23 Repaired 6/7/23 Repaired 6/30/23. Repaired 7/10/23. Repaired 6/8/23. To be Ordered and Repaired by 8/10/23
C 132	Bathrooms-Must Provide Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains; This Rule is not met as evidenced by: 1. Observations revealed that the bathrooms and toilet rooms were not designed to provide privacy where two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains. Findings on June 6, 2023: a. 300 Hall - constructed in 1986 has two bathrooms (one by 310 and one across from 304) with multiple toilets. None of the fixtures have privacy curtains or partitions.	C 132		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 164		

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C 164	Continued From page 2 (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. Observations revealed that the ceilings were not kept clean and in good repair. Findings on June 6, 2023: a. Restroom by Room 102 - the ceiling is spalling and has yellow water stains where the ceiling has bubbled and is flaking. b. Room 204 - the sheetrock ceiling along the side wall is bowing. There are yellow water stains in both corners of this wall and there is a black mildew stain at the exterior corner. c. Bath across from Room 208 - the ceiling over the shower is spalling.	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 facility is not maintained free from hazards. If the code	C 166		

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C 166	Continued From page 3 required clearance of 36" in front of electrical breaker panels is not maintained it could delay timely operation of the breakers in an emergency situation. Findings on June 6, 2023: a. 200 Hall Mechanical Room - there are cardboard boxes stacked in front of the electrical panel. 2. Observations revealed that the facility is not maintained free of hazards. Holes in the floor create a fall hazard. Findings on June 6, 2023: a. Exit across from 206 - there is a panel covering an opening in the floor. The panel does not sufficiently cover the opening leaving a 2" x 8" hole in the floor.	C 166		
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 there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings or walls could	C 189		

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C 189	Continued From page 4 allow fire and smoke to spread beyond the area of origin. Findings on June 6, 2023: a. Maintenance Office - there is an unsealed cable bundle at the data equipment rack. b. 200 Hall Mechanical Room - there is a hole in the ceiling. The electrical panel has been forced back into the walls leaving holes in the wall at the bottom of the panel and along the sides. c. 200 Hall - the cover plate for the exit sign base is missing at the exit sign by the Bathroom leaving small gaps in the fire resistant rated ceiling. d. Exit by 206 - there is an unsealed wire penetration over the door. e. Resident Laundry - there is an unsealed conduit penetration in the ceiling at the back wall. f. 300 Hall - there are at least five cable bundle or conduit penetrations that are not sealed properly where they penetrate the fire wall. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on June 6, 2023: a. Room 214 - the door does not latch when closed.	C 189		
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 199		

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C 199	Continued From page 5 (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. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings on June 6, 2023: a. Visitor's Bath - the exhaust fan is not working.	C 199		