STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL026068	A. BUILDING: 01 B. WING _____	08/01/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE ADDISON OF FAYETTEVILLE	1164 71ST SCHOOL ROAD CUMBERLAND, NC 28331

(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 a Construction Section Biennial Survey by Suzanna Fay conducted on August 1, 2023. Records indicate this facility was first licensed on June 10, 2008. The facility is currently licensed for 96 Beds including a 36 Bed Special Care Unit. Therefore, the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 2006 Edition of the North Carolina Building Code(s), Institutional Occupancy; Group I-2. Deficiencies were cited that require a Plan of Correction.	C 000		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Observations revealed that one of the two corridor (spa) bathrooms is being utilized for purposes other than those indicated in this rule. Findings on August 1, 2023: a. C Hall - the spa has been converted to office space.	C 135	We have requested an equivalency to use the room as an office due to the temporary conditional use of the space. The SCU unit is scheduled for a renovation and expansion. See attached letter.	9/8/2023

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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C 150	Continued From page 1	C 150		
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 there is a failure to maintain the corridors free of all equipment and other obstructions. This could could delay or hinder evacuation of the occupants from the facility in the event of an emergency. Findings on August 1, 2023: a. C Hall - there are chairs and a PTAC unit obstructing the short corridor to Room B-5. Note: Room B-5 is currently not occupied.	C 150	Items have been removed. Hallways will be kept free of equipment and furniture.	8/8/23

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: 1. Observations revealed that the outside grounds were not maintained in a clean and safe condition. Findings on August 1, 2023: a. Dining Patio - there is a raised planter box	C 160	Planter box was removed.	8/21/23

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C 160	Continued From page 2 approximately 4' x 6' that is beginning to deteriorate and is no longer stable. b. A 8' section of the gutter outside of the exterior electrical room is sagging and pulling away from the building. c. A vent grille adjacent to the damaged gutter is pulling loose from the exterior soffit. d. A section of the gable siding has fallen off outside of the D Hall exit. e. SCU Courtyard - the fence around the courtyard is buckling in some areas and leaning in some areas.	C 160	The gutter section was re-secured to the fascia board. Vent grill re-attached to soffit. Ordered special siding expected completion date 9/13/23 Courtyard fence post re-secured and supported.	8/15/23 8/15/23 9/13/2023 8/10/23

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. Observations revealed that the ceilings and floors were not kept clean and in good repair. Findings on August 1, 2023: a. Corridor outside of Dining - the carpet behind the Dining Room doors is worn and damaged along the wall from a leak in the kitchen. b. There is a pattern of dirty exhaust fans throughout the facility. c. C Hall Dining - one of the thresholds at the door to Dining has fallen off.	C 164	The Carpet was replaced along with the baseboard. Exhaust fans have been cleaned and will be add to the housekeeping schedule. Threshold was replaced.	8/10/23 8/5/23 8/16/23

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C 164	Continued From page 3 d. D Hall Laundry - there is a large amount of lint on the floor behind the washer and dryer.	C 164	Laundry room cleaned and added to the housekeeping schedule.	8/10/23

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. Observations revealed that the facility was not maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards. Findings on August 1, 2023: a. Room B-6 - there is an excessive amount of furniture, paint and miscellaneous items stored in the room making it a fall hazard and a fire hazard.	C 166	Empty rooms will be kept clean and organized Free of clutter and debris .	9/8/23
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 home did not have all electrical outlets in wet locations at sinks, bathrooms and outside of building equipped with	C 188		

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C 188	Continued From page 4 ground fault interrupters. Findings on August 1, 2023: a. Room D 9 Bath - the GFCI at the sink does not have power and cannot be reset.	C 188	The receptacle was replaced and working properly.	8/17/23
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 and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be effected if the equipment failed to alert the occupants in case of a fire. Findings on August 1, 2023: a. The fire alarm panel is showing a trouble signal. Interview with staff revealed that two of the duct detectors are bad and he is working to locate those for replacement. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if doors do not completely close and latch to help limit the	C 189	The faulty duct detectors have been replaced and the panel reads system normal.	8/12/23

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C 189	Continued From page 5 spread of smoke or fire to the area of origin. Findings on August 1, 2023: a. D Hall - the left door of the cross corridor doors did not latch when released by the fire alarm. 3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on August 1, 2023: a. Dining - the emergency light outside of the kitchen is missing from the base. b. The emergency light outside of the Dining Room is dangling from its wires. c. The emergency light outside of A 18 is missing from the base. d. The emergency light outside of B 11 is missing from the base. e. The emergency light outside of B 1 did not illuminate on test. f. C Hall - the emergency light at the back exit did not illuminate on test. g. C Hall - the emergency light outside of Dining did not illuminate on test. 4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on August 1, 2023: a. C Hall - the exit sign by Room C 8 did not illuminate on test.	C 189	The was adjusted to latch properly. All lights have been either replaced or repaired. E lights will be tested at a higher frequency. The exit sign will be replaced by 9/11/23	8/14/23 8/12/23 9/11/23

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C 189	Continued From page 6 5. 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 allow fire and smoke to spread beyond the area of origin. Findings on August 1, 2023: a. Entry Vestibule - maintenance is in the process of replacing the recessed light in the ceiling of the vestibule leaving a large hole in the ceiling at the time of survey. b. Kitchen - there are two holes approximately 1" in diameter in the wall over the icemaker. c. C Hall Linen Closet - the fire caulk around the cable penetration in the ceiling has fallen out leaving an opening in the fire resistant rated ceiling. d. C Hall Electrical Closet - there is an unsealed cable penetration over the Altronix panel. e. Room C 6 Closet - the escutcheon ring is missing from the sprinkler head leaving a gap in the fire resistant rated ceiling. f. C Hall - there is a small hole in the ceiling outside of Utility where a camera was relocated. g. D Hall - there is a small unsealed cable penetration over the exit sign by Room D 11. 6. 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 August 1, 2023: a. Kitchen - the left door is dragging requiring the user to lift the door in order to close it. The finish on both of the kitchen doors is dirty and flaking	C 189	Vestibule light Repaired. Kitchen holes Repaired. Linen Closet Repaired. Electrical closet Repaired. C6 escutcheon ring replaced. Camera hole repaired. Dhall cable hole repaired. The kitchen doors are both being replaced. The contractor is waiting on material a letter of intent will be attached.	8/12/23 Thru 8/18/23 10/20/23

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C 189	Continued From page 7 off. b. Room A 14 - the door does not latch when closed. c. Room A 12 - the lockset is missing and the latch is engaged and cannot be retracted which prevents the door from closing. d. Room A 4 - the latch is jammed and the door does not latch when closed. e. Room C 12 - the door hardware is loose. 7. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Findings on August 1, 2023: a. C Hall Laundry - the valve box has standing water and the box is rusty from a prior leak. 8. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain 18" clearance below the sprinkler heads creates an obstruction which limits the ability of the sprinkler system to suppress a fire. Findings on August 1, 2023: a. C Hall Storage - the adult diapers are stored to within 18" of the ceiling. 9. Observations revealed that the electrical equipment is not maintained in a safe and operating condition. Findings on August 1, 2023: a. The screamer box for the override switch at the door by C-13 to the Courtyard did not alarm when opened. b. The screamer box for the override switch at the Courtyard gate did not alarm when opened.	C 189	A14 Repaired A12 Repaired A4 Repaired C12 will be completed by 9/11/23 The valve box and valves have been replaced. The wall for the valve box should be completed 9/11/23 Maintenance Director or designee will retrain staff on our storage policies and items will be stored in accordance with the rule. Both boxes have been repaired.	8/15/23 8/15/23 8/15/23 9/11/23 8/25/23 9/13/23 8/12/23

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C 193	Continued From page 8	C 193		
C 193	Ovens, Ranges in Activity or Res. Rooms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (4) Ovens, ranges and cook tops located in resident activity or recreational areas shall not be used except under facility staff supervision. The degree of staff supervision shall be based on the facility's assessment of the capabilities of each resident. The operation of the equipment shall have a locking feature provided, that shall be controlled by staff. (5) Ovens, ranges and cook tops located in resident rooms shall have a locking feature provided, controlled by staff, to limit the use of the equipment by residents who have been assessed by the facility to be incapable of operating the equipment in a safe manner. (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 ovens, ranges and cook tops located in resident activity or recreational areas were not maintained for operation under facility staff supervision. Findings on August 1, 2023: a. Country Kitchen - the oven was operational and there was no staff supervision. b. D Hall Craft Room - the oven was operational and there was no staff supervision.	C 193	Keyed power switches are in place to secure the ovens when not supervised.	8/5/23
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 195		

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C 195	Continued From page 9 REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soiled utility rooms are not maintained at a minimum of 100 degrees F to a maximum of 116 degrees F. Findings on August 1, 2023: a. A Hall - water temperatures are ranging from 88 degrees F to 104 degrees F. Interview with staff revealed that they are replacing the recirculating pump for the water heater on that hall.	C 195	The recirculating pump was replaced and water temps are 107 degrees to 114 degrees	8/4/23
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:	C 199		

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C 199	Continued From page 10 (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 August 1, 2023: a. Laundry - the exhaust fans do not appear to be working in the Laundry Room nor in the Soiled Linen Room. b. B Hall Spa - the exhaust fan is not working. c. D Hall Guest Toilets - the exhaust fans are not working.	C 199	All exhaust ventilation repairs are completed and tested.	8/9/23

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August 29, 2023

Jeff Harms Division Section Chief

DHSR Construction Section

2705 Mail Service Center

Raleigh, NC 27699-2705

Dear Mr. Harms

As suggested by Suzanna Fay, Engineering Surveyor, I am requesting an equivalency to use the Memory Care Bathroom as a office. This is a temporary conditional use as the Memory Care unit is scheduled for a renovation and expansion. Once the renovation is complete, there will be a room built for the purpose of being the Memory Care Director's office. We currently have a bathroom with a shower, sink, toilet, and tub for the use of the Memory Care residents. This bathroom is located on B Hall on the assisted living area of the community.

Please let me know if there is anything further you need from me to review this request.

Sincerely,

Phoebe Robertson

Executive Director

The Addison of Fayetteville

THE ADDISON
OF FAYETTEVILLE

1164 71ST SCHOOL ROAD | FAYETTEVILLE, NC 28314
PHONE: 910.764.2020 | FAX: 910.764.2022

Marcio Alves

From: Kirk Moffitt <KirkM@kramerconst.com>
Sent: Friday, September 8, 2023 4:37 PM
To: Marcio Alves
Cc: Ryan McMahon; Caitlyn Kramer; Jeff Kramer
Subject: RE: Addison of Fayetteville- Kitchen Fire Doors

CAUTION: External Email !

Thanks,

Kirk Moffitt
Vice President, Business Development
Kramer Construction & Management, Inc.

(847) 818-9414 | (847) 868-6340
KirkM@KramerConst.com
www.KramerConst.com
270 Larkin Drive, Unit D, Wheeling, IL 60090

From: Kirk Moffitt
Sent: Friday, September 8, 2023 2:10 PM
To: malves@seniorlifestyle.com
Cc: Ryan McMahon <RyanM@kramerconst.com>; Caitlyn Kramer <CaitlynK@kramerconst.com>; Jeff Kramer <JeffK@kramerconst.com>
Subject: Addison of Fayetteville- Kitchen Fire Doors

Marcio,

We have started the process of the replacement for the kitchen Fire Door's off your main dining room. Expected lead time for replacement is 30 – 45 days.

I will keep you updated as we get closer.

Thanks,

Kirk Moffitt
Vice President, Business Development
Kramer Construction & Management, Inc.

(847) 818-9414 | (847) 868-6340
KirkM@KramerConst.com
www.KramerConst.com
270 Larkin Drive, Unit D, Wheeling, IL 60090