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	HAL080026	A. BUILDING: 01 B. WING _____	10/11/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE MEADOWS OF ROCKWELL RETIREMENT	612 HIGHWAY 152 EAST ROCKWELL, NC 28138

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on October 11, 2023. Records indicate this facility was first licensed as a Home for the Aged serving 120 residents on August 9, 1988. Therefore, this facility must meet the 1987 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1978 North Carolina State Building Code (Revision 9) Section 409, Institutional Occupancy, Unrestrained. Deficiencies were cited that will require a Plan of Correction.	C 000	Responses to the cited deficiencies do not constitute admission of the agreement by the facility of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies or Corrective Action Report. The Plan of Correction is preparead soley as a matter of compliance with State Law.	
C 144	Med Prep Area-Sink with Lever Handles SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (f) The requirements for storage rooms and closets are: (5) Handwashing facilities with wrist type lever handles shall be provided immediately adjacent to the drug storage area; This Rule is not met as evidenced by: 1. Observations revealed that not all of the handwashing facilities adjacent to the drug storage areas have wrist type lever handles. Findings on October 11, 2023: a. C Hall Med Room near SCU - the med room sink does not have wrist type lever handles.	C 144	Wrist type lever handles to be installed in SCU med room.	
C 154	Entrances/Exits-Wanderer Alarms SECTION .0300 - PHYSICAL PLANT	C 154		

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C 154	Continued From page 1 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 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 and interview, the facility did not equip each exit with a sounding device as required when there is at least one resident who is disoriented or a wanderer. Findings on October 11, 2023: a. SCU - interview with staff revealed that the facility has at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer and none of the exterior doors or gates have sounding devices on the doors that is activated when the door is opened.	C 154	Door Screamers to be placed on 3 exit doors to be placed on SCU exit doors to be activated when exit door is opened.	1/5/24
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	C 164		

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C 164	Continued From page 2 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 walls, ceilings and floors were not kept clean and in good repair. Findings on October 11, 2023: a. 100 Hall Exit by Room 115 - a section of the floor base is coming unglued at the corner of the door. b. Room 112 - there are brown stains on the ceiling near the front left corner of the room. c. B Hall Living Room - there is water damage and the ceiling is peeling and flaking off in the front right corner of the room. d. Room 322 - there is a crack running the length of the room from the window wall to the corridor wall.	C 164	Floor base to be repaired at corner of the door in Room 115. Room 112 - Ceiling to be cleaned and repainted to removed brown stains from ceiling. Ceiling in B Hall Living Room to be repaired and painted in front right corner of room. Room 322 - Crack in ceiling of room from window wall to corridor wall to be repaired and painted.	1/5/24 1/5/24 1/5/24 1/5/24
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 was not	C 166		

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C 166	Continued From page 3 maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on October 11, 2023: a. B Hall Oxygen Storage - there were a number of tall oxygen tanks sitting in shallow plastic crates that were not secured to prevent them from tipping over. Note: these observations were made through the door's view window as this room was not accessible due to the Maintenance Technician not have a key to the room. 2. Observations revealed that the facility was not free of obstructions. Not having keys available can delay response time in the event of an emergency. Findings on October 11, 2023: a. There were several rooms, including bedrooms, that were not accessible as the Maintenance Technician could not locate the key.	C 166	All shallow plastic crates have been removed and replaced with metal crates or approved storage crates. Key to B Hall Oxygen Storage room is readily available from ED and Maintenance. Keys to each room in the facility are readily available from ED and Maintenance Tech.	12/21/23 1/5/24 1/5/24 12/21/23
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by:	C 175		

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C 175	Continued From page 4 1. Observations revealed that each bedroom or adjoining bathroom did not have a towel bar for each resident. Findings on October 11, 2023: a. There was a pattern of locations where the towel bar was removed leaving the rooms short one or two towel bars for each resident.	C 175	Each bedroom or adjoining bathroom to be equipped with towel bar/rack per resident.	1/5/24
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. Review of records revealed that the quarterly fire rehearsal logs did not provide a short description of what the rehearsal involved. Findings on October 11, 2023: a. The fire rehearsal logs did not include a short description for each event.	C 185	All fire rehearsal logs will contain a short description for each rehearsal.	1/5/24
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

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C 189	Continued From page 5 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 facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not function as intended during a fire. Findings on October 11, 2023: a. The sprinkler system has been turned off due to leaks on the system. Review of records and interview with staff revealed that the system has been down since the first of August. Fire watches are being conducted every 30 minutes per the Fire Marshal. 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 the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on October 11, 2023: a. The fire doors by Room 330 did not automatically latch when released by the fire alarm.	C 189	The Fire Sprinkler System has been fully repaired and restored to proper working order. County Fire Marshal visited the facility for reinspection and cleared repairs. Fires doors by Room 330 have been repaired to automatically latch when released by the fire alarm.	12/21/23 1/5/24

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C 189	Continued From page 6 3. 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 October 11, 2023: a. 100 Hall Storage Room across from the Office Hall - boxes are stacked to within 18" of the ceiling.	C 189	All boxes located in Storage Room on 100 hall across from Office have been removed from top shelf allowing required 18" clearance below the sprinler heads.	12/21/23
	4. 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 could allow fire and smoke to spread beyond the area of origin. Findings on October 11, 2023: a. 100 Hall Mechanical Room - there is a large hole in the middle of the ceiling.		100 Hall Mechanical Room - Hole in center of ceiling to be repaired.	1/5/24
	b. Room 138 - there is a small hole at the base of the front sprinkler head.		Room 138 - Hole at base of the front sprinkler head repaired.	1/5/24
	c. B Hall Activity Room - the sprinkler head at the back wall has dropped leaving a hole in the fire resistant rated ceiling.		B Hall Activity Room - Sprinkler head at back of wall has been corrected to ensure it being secured to ceiling for proper functioning.	1/5/24
	d. Dining - two of the sprinkler heads along the right wall are not aligned in the openings leaving holes in the fire resistant rated ceiling.		Sprinker heads along the right wall to be aligned and repaired.	1/5/24
	e. Dining Mechanical Room - there is one unsealed conduit penetration the ceiling.		Dining Mechanical Room - conduit in ceiling to be repaired.	1/5/24
	f. Kitchen - one of the sprinkler heads over the dishwashing area is missing its escutcheon ring.			
	g. Activity Director's Office - there is one unsealed conduit penetration in the ceiling to the right of the door.		AConduit in ceiling to the right of the door to be repaired.	1/5/24
	h. Room 336 - the escutcheon ring on the sprinkler head near the entry has dropped leaving a gap in the fire resistant rated ceiling.		Room 336 - Escutcheon ring on sprinkler head near entry to be repaired.	1/5/24

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C 189	Continued From page 7 i. B Hall Living Room at the end of the Hall - the screws are backing out of the vent grilles at two locations so that the grilles are loose and there are gaps in the ceiling. 5. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be effected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection. Findings on October 11, 2023: a. 100 Hall Mechanical Room - the fire extinguisher has not had its annual inspection. b. SCU Mechanical Room - the fire extinguisher has not had its annual inspection. 6. Observations revealed that the plumbing equipment was not maintained in a safe and operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility. Findings on October 11, 2023: a. Room 133 Bathroom - the toilet was not secure to the floor and there was water seeping onto the floor around the base of the toilet. 7. Based on observation, the electrical equipment is not being maintained in a safe operating condition. Missing or broken cover plates on electrical devices may cause injury to the occupants of the facility if wiring is exposed. Findings on October 11, 2023: a. Room 322 - the cover plate for the wall switch is missing leaving the junction box open.	C 189	Screws tightend to secure the vent grill at 2 locations on grills and cover gaps in ceiling. Fire extinguisher in 100 Hall Mechanical Room completed with annual inspection. SCU Mechanical Room - Fire extinguisher completed with annual inspection. Room 133 - Bathroom - Wax Ring to be installed around the base of the toilet. Room 322 - Cover plates for wall switches to be placed.	1/5/24 12/20/23 12/20/23 1/5/24 1/5/24

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C 199	Continued From page 8	C 199		
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. 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 October 11, 2023: a. Rooms 114 and 115 Shared Bath - the exhaust fan is not working. b. B Hall Women's Visitor Bathroom - the exhaust fan is not working. c. B Hall Soiled Linen - the exhaust fan is not working. d. B Hall Spa (near SCU) - the exhaust fan is not working. e. SCU Staff Bathroom - the exhaust fan is not working.	C 199	All exhaust fans to be repaired/replaced in order for each fan to be in proper working order. Room 114/115 Bathroom, B Hall Womens visitor bathroom, B Hall Soiled Linen Room, B Hall Spa (near SCU) and SCU Staff Bathroom.	1/5/24

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C 202	Continued From page 9	C 202		
C 202	Existing Fac. Housing Non-ambs-Hand Bells SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (j) Except where otherwise specified, existing facilities housing persons unable to evacuate without staff assistance shall provide those residents with hand bells or other signaling devices. (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 observations, the facility had a call system for residents to use as a signaling device. Findings on October 11, 2023: a. Room 336 - the call system in the bedroom has been removed by the previous resident and has not been reinstalled.	C 202	Room 336 - Call system in bedroom replaced and reinstalled.	1/5/24

Rosha A Fulmer 12/18/23