STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL090035	A. BUILDING: **01** B. WING _____	**12/18/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE ADDISON OF INDIAN TRAIL	**5306 SECREST SHORT CUT ROAD MONROE, NC 28110**

(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 Tod Hancock, conducted on December 18, 2023. This facility was licensure on December 3, 2009 for Ninety-Six (96) Beds, of which Thirty-Six (36) are Special Care Beds. Based on the above information, the facility is required to meet the 2005 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirmed and the 2006 North Carolina State Building Code, Section 407, Institutional Occupancy, Group I-2. Deficiencies have been cited and a Plan of Correction is required.	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:	C 101		

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C 101	Continued From page 1 1. Based on observation, and interview with Maintenance Director, the facility failed to meet the Code requirements in effect at the time of construction or alteration by not having all the components required to comply and properly operate doors equipped with Special Locking. This could affect all occupants who need to evacuate through the door(s). Findings December 18, 2023: a. C Hall--Nurse Station- Upon test, via the master override switch, the magnetic locks failed to disengage.	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: 1. Based on record review and interview with staff, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this rule. Findings December 18, 2023: a. There were no records available to indicate the Fire Marshall had inspected the facility.	C 111		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION	C 185		

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C 185	Continued From page 2 (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 the facility did not have a record of fire rehearsals being conducted quarterly on each shift. Findings December 18, 2023: 1.Review of records revealed the facility did not have a record of fire rehearsals being conducted quarterly on each shift.	C 185		
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 facility is not maintaining the electrical components located near a water source in a safe manner. Findings on December 18, 2023: a. D Hall-Laundry- The receptacle behind the	C 188		

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C 188	Continued From page 3 washing machine did not trip on test indicating the lack of ground fault protection. b. C Hall-Laundry- The receptacle behind the washing machine did not trip on test indicating the lack of ground fault protection.	C 188		
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 facility failed to maintain the fire safety systems in a safe operating condition. This could endanger all occupants by delaying the signaling of first responders in an emergency. Findings on December 18, 2023: a. The Fire Alarm Control Panel (FACP) is indicating trouble. The panel is indicating trouble with a duct detector at Air Handling Unit #3 located above the Kitchen in the attic. 2. Based on observation, the buildings plumbing system is not maintained in a safe manner. Findings December 18, 2023: a. Kitchen- The ice machine drain does not have a 2" air gap 3. Based on observation, the buildings'	C 189		

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C 189	Continued From page 4 emergency equipment is not maintained in a safe operating condition. This could affect all if they could not promptly find their way to the exit during an emergency. Findings on December 18, 2023: a. B Hall-At Employee Break Room- The Exit sign is not illuminated. 4. Based on observation, the building fire safety components were not maintained in a safe and effective condition. This could expose all to fire/smoke if not contained in the room of origin. Findings on December 18, 2023: a. A- Hall- Electrical Room- There is a hole in the rated wall assembly. b. D-Hall- Electrical Room- There is a hole in the rated ceiling assembly. c. Exterior- Mechanical Room- There is a large hole in the rated ceiling assembly. 5. Based on observation and interview with the Maintenance Director, the facility is not maintaining its electrical system in a safe and operational manner. Findings on December 18, 2023: a. Foyer-The lights in the foyer are not operational. They appear to be fed from panel A2, circuit #12. b. Building System Closet- The overhead light is not operational. 6. Based on observation, the building was not maintained in a safe operating condition, because the portable fire extinguishers lacked the routine inspections documentation required to ensure a proper performance. Failure to maintain fire safety equipment could affect occupants of the facility if the equipment does not function to suppress a fire. Findings on December 18, 2023:	C 189		

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C 189	Continued From page 5 a. There was no documentation of the required monthly fire extinguishers inspections.	C 189		
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, the facility is not maintaining its exhaust fan in an operable condition. This could cause unnecessary odors as well as mildew. Findings December 18, 2023: a. C-Hall 400- Utility Closet- The exhaust fan is not working. b. C-Hall 400- Janitor Closet- The exhaust fan is not working.	C 199		