STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL060167	A. BUILDING: **01** B. WING _____	**12/19/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKBRIDGE TERRACE AT MATTHEWS GLEN	**701 PLANTATION ESTATES DR MATTHEWS, NC 28105**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on December 19, 2023. Records indicate this facility was converted from a licensed Nursing Home to a 100 bed Assisted Living facility on March 17, 2021. Therefore, we are requiring that this facility meet the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 2018 edition of the North Carolina State Building Code, Institutional Occupancy. Deficiencies were cited that require a Plan of Correction.	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. Observations revealed that the facility does not meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. Electromagnetic locks shall have an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors in the facility. Release switches shall be located and properly identified at each nurses station serving the locked unit. An additional emergency release switch shall be provided for each locked door and located within 3 feet of the door. Findings on December 19, 2023: a. Daisy Run Courtyard - the emergency release switch located within 3 feet of the gate did not release the gate when pressed.	C 101		
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 exterior grounds were not maintained in a clean and safe condition. Findings on December 19, 2023: a. Exit by elevator - the exterior vinyl ceiling over the doors is sagging and pulling away from the trim and the vent over the door is detaching from	C 160		

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C 160	Continued From page 2 the ceiling.	C 160		
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 were not kept clean and in good repair. Findings on December 19, 2023: a. Butterfly Ridge Salon - there are several water stained ceiling tiles along the corridor wall. b. Apple Blossom Salon Storage - there is a 3" diameter hole in one of the ceiling tile. c. Rose Arbor Team Room - two of the ceiling tiles are missing.	C 164		
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)	C 189		

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C 189	Continued From page 3 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 facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be affected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on December 19, 2023: a. Harmony Hall - the left door of the entrance doors did not latch when released by the fire alarm. b. Azalea - the left door of the cross corridor doors did not latch when released by the fire alarm. c. Butterfly Ridge - the right door of the cross corridor doors did not latch when released by the fire alarm. d. Lavender Lane - the left hand door of the entry doors did not latch when released by the fire alarm. 2. 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 December 19, 2023: a. Lavender Lane Room 128 - the conceal cover for the sprinkler head in the closet is missing. b. Lavender Lane Storage Room - the escutcheon ring on the sprinkler head has dropped leaving a gap in the fire resistant rated ceiling. c. Electrical Room outside of Daisy Run entrance	C 189		

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C 189	Continued From page 4 - there is one unsealed cable penetration and the conduits over the fire alarm equipment are not sealed where they penetrate the ceiling. d. Daisy Run Staff Bathroom - the escutcheon ring is missing on the sprinkler head. e. Apple Blossom Salon Storage - the sprinkler head is missing its escutcheon ring. f. Electrical Room outside of Rose Arbor - there are unsealed conduit penetrations over the fire alarm panels. g. Rose Arbor - the escutcheon ring is missing at the sprinkler head at the end of the hall outside of Stair 5. 3. 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 December 19, 2023: a. Butterfly Ridge Room 104 - the door is not latching when closed. 4. 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 affected if the equipment failed to alert the occupants in case of a fire. Findings on December 19, 2023: a. Storage Room at entrance to Rose Arbor - the smoke detector is wrapped in tape. The tape was removed at the time of survey. 5. Based on observation the facility's fire safety systems are not maintained in a safe condition.	C 189		

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C 189	Continued From page 5 Failure to maintain fire safety systems in a safe condition could affect occupants of the facility if the system did not provide the required fire resistant rated protection. Findings on December 19, 2023: a. Rose Arbor Environmental Services Room - the spray-on fire proofing material has been removed at the hangers and along one section of the metal pan roofing compromising the fire resistant rating of the roof/ceiling assembly.	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. 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.	C 199		

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C 199	Continued From page 6 Findings on December 19, 2023: a. Lavender Lane - the exhaust fans are not working on this hall.	C 199		