

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060138	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/25/2024
NAME OF PROVIDER OR SUPPLIER WALTONWOOD AT PROVIDENCE		STREET ADDRESS, CITY, STATE, ZIP CODE 11945 PROVIDENCE ROAD CHARLOTTE, NC 28277		
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on April 25, 2024. Records indicate this facility was first licensed on 04/01/2015. The facility is currently licensed for 80 Beds including a 26 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 2012 Edition of the North Carolina Building Code(s), 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		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Service Regulation

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C 101	Continued From page 1 1. Based on observation, the facility failed to meet the NC State Building Code in effect at the time of construction or alterations. Findings on April 25, 2024: a. 2nd FL, Corridor between Bedrooms 2009 and 2013 - the corridor smoke detectors were spaced 44 feet apart at one location and 16 feet apart at another location.	C 101		
C 155	Floors-Non-skid, in Good Repair SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (i) The requirements for floors are: (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable; (2) Scatter or throw rugs shall not be used; and (3) All floors shall be kept in good repair. This Rule is not met as evidenced by: 1. Based on observations, the facility has failed to maintain the floors smooth and in good repair. Findings on April 25, 2024: a. 1st FL, Men Public Restroom, - the floor drain grate was at least 1/2 inch below the floor level, creating a tripping hazard.	C 155		
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;	C 164		

Division of Health Service Regulation

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C 164	Continued From page 2 (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the mechanical systems were not kept clean and in good repair. Findings on April 25, 2024: a. 2nd FL, Bedroom 2019 - the exhaust ventilation system grille with its radiation damper had an excessive accumulation of dust/lint.	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 Building was not maintained free of hazards because the compressed gas cylinders were not properly secured. They may fall and break their valves off. This would turn the compressed gas cylinder into a dangerous projectile. Findings on April 25, 2024: a. 2nd FL, Med Room near Aid Station - four portable oxygen cylinders were standing up on the floor in a beverage crate not properly chained or supported by the wall or in a stand or cart. One portable oxygen cylinder with a handle was standing up on the floor not properly chained or	C 166		

Division of Health Service Regulation

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C 166	Continued From page 3 supported by the wall or in a stand or cart. One portable oxygen cylinder was standing up on the floor not properly chained or supported by the wall or in a stand or cart. Five portable oxygen cylinders were standing up on the floor in a two-inch-high crate, turned upside down not properly chained or supported by the wall or in a stand or cart. b. 1st FL, Bedroom 1023 - a portable medical oxygen cylinder with regulator extending beyond its collar guard was standing up on the floor not properly chained or supported by the wall or in a stand or cart.	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, the building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier do not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on April 25, 2024: a. 2ND FL. Smoke Barrier near Elevator 5 - the back leaf, of the double-egress cross-corridor	C 189		

Division of Health Service Regulation

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C 189	Continued From page 4 doors, did not latch into its frame when the fire alarm system released the doors. 2. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activation of the fire alarm system. Findings on April 25, 2024: a. 2nd FL, Storage C225 (Mech Room) - the duct detector's sampling tubes for the HVAC unit were dirty. b. 2nd FL, Storage C216 in Resident Laundry (Mech Room) - the duct detector's sampling tubes for the HVAC unit were dirty. c. 1st FL, SCU Room next to Storage C180 - the duct detector's sampling tubes for the HVAC unit were dirty. 3. Based on observations, the fire-resistance-rated construction enclosures providing protection from Incidental areas were not being maintained in a safe and operating condition by providing one-hour rated fire-resistant-rated construction and 45-minute rated self-closing doors. This could affect all if smoke/flames are not contained to the room of origin. Findings on April 25, 2024: a. 2nd FL, Attic - this 100 plus square feet storage room had its 45 min fire rated door propped open with a 50-pound bag of leveling compound. b. 2nd FL, Soiled Linen C214 In Residents Laundry - this 45 min fire rated door was propped open with a door wedge. c. 1st FL, Copy Room - this 100 plus square feet storage room had its 45 min fire rated door was propped open with a door wedge.	C 189		

Division of Health Service Regulation

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C 189	Continued From page 5 4. Based on observation, the building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacks the inspections, maintenance, and documentation needed to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system does not work properly when needed. Findings on April 25, 2024: a. 1st FL, Kitchen, - per the attached maintenance tag, the commercial kitchen hood fire suppression systems last semi-annual maintenance was performed in August 2023. This exceeds the requirement to have this fire suppression system inspected and tested at least semi-annually. In addition, there has been no documentation of the monthly in-house or owner inspections since that time. 5. Based on observations, the building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in the room of origin. Findings on April 25, 2024: a. 2nd FL, Bedroom 2019-HVAC Closet - there was a flexible conduit and a hole not firestopped as they penetrated the fire-resistance-rated ceiling assembly. b. 2nd FL, Bedroom 2018-HVAC Closet - there was a flexible conduit and a hole not firestopped as they penetrated the fire-resistance-rated ceiling assembly. c. 2nd FL, Mech Room C - there was a flexible conduit and a hole not firestopped as they penetrated the fire-resistance-rated ceiling assembly. d. 2nd FL, Mech Room near Theater - the firestopped sealant was pulled away from the insulated refrigerant line, leaving several	C 189		

Division of Health Service Regulation

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C 189	Continued From page 6 unprotected openings in the ceiling. In addition, there were several ½ inch holes in the ceiling were someone attempted to install a treaded rod. A second insulated refrigerant line had dropped down and pulled away the drywall tape concealing a large hole not firestopped as it penetrated the fire-resistance-rated ceiling. e. 2nd FL, Aid Station - there was a 2x4 inch hole not firestopped as they penetrated the fire-resistance-rated ceiling assembly. f. 2nd FL, Atrium Space - a bolt was missing from the fire-rated window stop that secures the fire-rated glass plane to the frame. g. 1st FL, FACP Room - there was a cable not firestopped as it penetrated the fire-resistance-rated ceiling assembly. h. 1st FL, Electrical Room C148 - there was a cable not firestopped as it penetrated the fire-resistance-rated ceiling assembly. i. 1st FL, Kitchen - there was a conduit from the hood suppression system pull not firestopped as it penetrated the fire-resistance-rated ceiling assembly. j. 1st FL, SCU Storage C180 - there was a new cable installed through the existing firestopping and it was not firestopped. 6. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on April 25, 2024: a. 1st FL, Bedroom 1025-Bathroom - a multi-plug adaptor, without integral overcurrent protection, was attached to an electrical power receptacle. b. 1st FL, Residential Care Coordinator - a multi-plug adaptor, without integral overcurrent protection, was attached to an electrical power receptacle.	C 189		

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C 189	Continued From page 7 7. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This would affect all if fire were not contained in the room of origin. Findings on April 25, 2024: a. 2nd FL, Corridor near stair 5 - a fire sprinkler escutcheon plate had dropped from the ceiling, exposing an opening around the sprinkler that allows fire and smoke to spread into the attic. b. 2nd FL, Corridor near Bedroom 2027 - a fire sprinkler escutcheon plate had dropped from the ceiling, exposing an opening around the sprinkler that allows fire and smoke to spread into the attic. c. 2nd FL, Aid Station - a fire sprinkler escutcheon plate had dropped from the ceiling, exposing an opening around the sprinkler that allows fire and smoke to spread into the attic. d. 2nd FL, Corridor near Bedroom 2010 - a fire sprinkler escutcheon plate had dropped from the ceiling, exposing an opening around the sprinkler that allows fire and smoke to spread into the attic. e. 1st FL, Elevator 4 Lobby - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling providing an opening that allows fire and smoke to spread into the floor/ceiling assembly. f. 1st FL, Kitchen Assembly Area - a fire sprinkler head was debris-loaded with lint and grease. 8. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on April 25, 2024: a. 2nd FL, Bedroom 2024 - a rubber wedge was	C 189		

Division of Health Service Regulation

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C 189	Continued From page 8 holding the corridor door open. b. 2nd FL, Bedroom 2029 - a rubber wedge was holding the corridor door open. c. 2nd FL, Theater Room Back Door - a table was holding the corridor door open. d. 1st FL, Bedroom 1013 - a rubber wedge was holding the corridor door open. e. 1st FL, Hobby Room - a rubber wedge was holding the corridor door open. f. 1st FL, Wellness Coordinator - a mechanical kick-down was holding the corridor door open. g. 1st FL, SCU Serenity Den - a big stuffed animal was holding the corridor door open.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 prevent the use of portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if the heater was the ignition source of a fire. The danger increases if used by residents or combustible material was near. Findings on April 25, 2024: a. 1st FL, Concierge Desk - two portable electric	C 191		

Division of Health Service Regulation

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C 191	Continued From page 9 heaters were found in this space. b. 1st FL, Life Enrichment Office - a portable electric heater was found in this space.	C 191		
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 and testing with a thin plastic sheet, the facility did not provide working exhaust ventilation in required spaces. Findings on April 25, 2024: a. 2nd FL, Residents Laundry - the exhaust ventilation system was not working. b. 2nd FL, Soiled Linen C214 in Residents Laundry - the exhaust ventilation system was not working. c. 1st FL, Women Public Restroom - the exhaust ventilation system was not working. d. 1st FL, Residents Laundry C172 - the exhaust ventilation system was not working.	C 199		

Division of Health Service Regulation

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C 199	Continued From page 10 2. Based on observation and interview with the Maintenance Director, the facility failed to meet the 2005 Rule requiring exhaust ventilation at the rate of two cubic feet per minute per square foot for housekeeping closets; and laundry areas. Findings on April 25, 2024: a. 2nd FL, Mechanical Electrical Room C207 (Storage) - this room was being used to store seven Biohazard boxes. These boxes have an unpleasant odor and there was no exhaust ventilation system in the room. b. 1st FL, Kitchen-Housekeeping - this room does not have an exhaust ventilation system.	C 199		