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	HAL059033	A. BUILDING: **01** B. WING _____	**05/01/2024**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on May 1, 2024. Records indicate this facility was first licensed on July 1, 1966, for 30 beds. The current capacity is 29 beds. Based on this information, we are requiring the facility to meet the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the applicable portions of the current 2005 Rules for Adult Care Homes of Seven or More Beds. Deficiencies were cited that require a Plan of Correction.	C 000		
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 the Staff in Charge, the facility failed to maintain current (completed within the last twelve months) sanitation and fire and building safety inspection reports in the home and available for review. Findings on May 1, 2024: a. There was no Fire Official (Fire Marshal) report available for review. b. There was no Building Sanitation Inspection report available for review. c. There was no "National Fire Alarm and Signaling Code", NFPA 72 report available for review.	C 111		

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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. Based on observation, the outside grounds were not maintained in a clean and safe condition. Findings on May 1, 2024: a. Front, Left and Right Porches - these slabs were not flush with the adjacent ground. This creates a tripping hazard. b. Right Porch - the earthen ramp, covered with a walk-off mat, had a half inch high bump creating an unseen tripping hazard.	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. Based on observation, the walls were not kept clean and in good repair.	C 164		

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C 164	Continued From page 2 Findings on May 1, 2024: a. Bedroom 2 - the lower half of the wooden corridor door frame, was damaged/worn-out and there were holes in the wood showing up. 2. Based on Observation, the facility failed to prevent chronic unpleasant odors. This would affect residents, staff and visitors by exposing them to an unpleasant environment. Findings on May 1, 2024: a. Bedroom 5 - there was a strong pet odor that persisted during the Construction Survey. 3. Based on observation, the Building Plumbing fixtures are not free of all hazards. Findings on May 1, 2024: a. Bath near Bathroom 12 - an unidentified liquid was found on the floor at the commode. b. Bathroom 19 Shared Bath - an unidentified liquid was found on the floor at the commode.	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.	C 166		

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C 166	Continued From page 3 This would turn the compressed gas cylinder into a dangerous projectile. Findings on May 1, 2024: a. Bedroom 16 - 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. b. Med Room - 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 170	Housekeeping-Curtains, Blinds, Res. Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (9) have curtains, draperies or blinds at windows in resident use areas to provide for resident privacy; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to maintain the resident's privacy. Findings on May 1, 2024: a. Bedroom 17 Shared Bathroom - the Bathroom door leaf was missing its door handle, and the opening was covered with a clear acrylic material.	C 170		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND	C 175		

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C 175	Continued From page 4 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: 1. Based on observation, the facility failed to provide residents areas with the required individual towel bar for each resident. Findings on May 1, 2024: a. Bedroom 1 - this triple occupancy bedroom and adjoining bathroom was missing one of its three required individual towel bars. b. Bedroom 5 - this double occupancy bedroom and adjoining bathroom was missing one of its two required individual towel bars. c. Bedroom 17 - this double occupancy bedroom and adjoining bathroom was missing both of its two required individual towel bars.	C 175		
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.	C 185		

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C 185	Continued From page 5 (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with the Staff in Charge, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on May 1, 2024: a. During the 1st quarter of the last 12 months, no rehearsals occurred on the 1st, and 3rd shifts. b. During the 2nd quarter of the last 12 months, no rehearsals occurred on the 1st, 2nd, and 3rd shifts. c. During the 3rd quarter of the last 12 months, no rehearsals occurred on the 2nd, and 3rd shifts. d. During the 4th quarter of the last 12 months, no rehearsals occurred on the 2nd, and 3rd shifts.	C 185		
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 observations, the building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if	C 189		

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C 189	Continued From page 6 not contained in the room of origin. Findings on May 1, 2024: a. Nurse Station - there was a wire bundle, a conduit and a cable not firestopped as they penetrated the fire-resistance-rated ceiling assembly. b. Bedroom 15 - there was a cable with its firestopped sealant pulled out of the fire-resistance-rated ceiling, leaving an unprotected opening. c. Bedroom 18 Closet - there was a cable not firestopped as it penetrated the fire-resistance-rated ceiling assembly. d. Kitchen Linen - there was a cable not firestopped as it penetrated the fire-resistance-rated ceiling assembly. e. Kitchen Pantry - there was a two-inch hole not firestopped as it penetrated the fire-resistance-rated ceiling assembly. 2. 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 May 1, 2024: a. Kitchen -the last semi-annual maintenance, for the commercial kitchen hood's fire suppression system, was performed in October 2023. Since then, there has been no documentation of the required monthly in-house/owner inspections. 3. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing	C 189		

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C 189	Continued From page 7 early detection and activation of the fire alarm system. Findings on May 1, 2024: a. Kitchen Pantry - the fire alarm system's heat detector and associated box was dangling from the ceiling by its circuit conductors. 4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on May 1, 2024: a. Bedroom 6 - the Room light fixture was missing its globe. b. Med Room - a multi-plug adaptor, without integral overcurrent protection, was attached to an electrical power receptacle. c. Bedroom 16 - the Room light fixture was missing its globe. 5. Based on observation the fire safety equipment was not being maintained to ensure safety. This could hamper the staff's ability to extinguish a small fire, permitting it to grow. Findings on May 1, 2024: a. Corridor near Bedroom 1 - the portable fire extinguisher had its last annual maintenance performed in January 2023. Portable fire extinguishers are subject to be maintained at intervals that do not exceed one year. b. Nurse Station - the last annual portable fire extinguisher maintenance was performed in May 2023. Since February 2024, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections. c. Corridor near Bedroom 18 - the last annual portable fire extinguisher maintenance was performed in May 2023. Since February 2024, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections.	C 189		

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C 189	Continued From page 8 d. Kitchen - the last annual type K portable fire extinguisher maintenance was performed in October 2023. Since February 2024, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections. 6. Based on observation, the HVAC system was not maintained in a safe and operating condition. This would affect all residents, staff and visitors by allowing unsafe conditions to persist. Findings on May 1, 2024: a. Corridor near Bedroom 1 - the baseboard heater's end cap was laying on the floor exposing internal components, and some had sharp edges.	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 and testing with a thin plastic sheet, the facility did not provide working	C 199		

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C 199	Continued From page 9 exhaust ventilation. Findings on May 1, 2024: a. Med Room - the exhaust ventilation system was not working.	C 199		