

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL072014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/18/2024
NAME OF PROVIDER OR SUPPLIER THE LANDINGS OF ALBEMARLE		STREET ADDRESS, CITY, STATE, ZIP CODE 603 SOUTH CHURCH STREET HERTFORD, NC 27944		
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on June 18, 2024. This facility was licensed on April 9, 2021 and is currently licensed for 50 Beds. Therefore, this facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 2012 Edition of the North Carolina Building Code, Institutional Occupancy. Deficiencies have been cited and a Plan of Correction is required.	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. Review of records revealed that the facility did not have fire and building safety inspection reports maintained in the home and available for review. Findings on June 18, 2024: a. The Fire Official has not been out to conduct an inspection since the initial building inspection in 2021.	C 111		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT	C 150		

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

TITLE

(X6) DATE

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C 150	Continued From page 1 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation there is a failure to maintain the corridors free of all equipment and other obstructions. Means of egress or exit paths that are obstructed or blocked could delay or hinder emergency evacuation of the occupants from the facility. Corridors are to be maintained with a 6' clearance at all times. Findings on June 18, 2024: a. Service Hall - there are two rolling carts, a garbage can and two full large black plastic bags in the service hall corridor reducing the width to less than six feet.	C 150		
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.	C 164		

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C 164	Continued From page 2 Findings on June 18, 2024: a. Room 314 - there are two 12" diameter water stains on the ceiling by the supply vent. b. 400 Hall Soiled Linen - there are water stains and black mildew spots around the perimeter of the supply vent behind the door. The ceiling finish is bubbled and flaking around the same vent.	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. Observations revealed that the facility was not maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards. Combustible materials should not be stored in the dryer service access areas. Findings on June 18, 2024: a. Exterior Dryer Access Area - there were two mobile carts filled with binders being stored behind the dryers.	C 166		
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	C 188		

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C 188	Continued From page 3 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 not all electrical outlets in wet locations at sinks, bathrooms and outside of building have functioning ground fault interrupters. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection. Findings on June 18, 2024: a. Beauty Salon - the left outlet is not a GFCI outlet.	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 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 June 18, 2024:	C 189		

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C 189	Continued From page 4 a. The FACP is indicating trouble with the generator relay switch. b. Riser Room - one of the smoke detectors was dangling from its wires. This was corrected at the time of survey. 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 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 June 18, 2024: a. The right hand door of the cross corridor doors by Room 304 is not latching when released by the fire alarm. 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke corridor doors must not have gaps between pairs of doors. Findings on June 18, 2024: a. Service Hall - there is a 1/2" gap between the closed doors entering the Service Hall. 4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on June 18, 2024: a. The exit sign over the dining door by the Kitchen did not illuminate on test. 5. Based on observation there is a failure to	C 189		

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C 189	Continued From page 5 install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping with a minimum 2" air gap could affect all occupants of the facility if the domestic water supply became contaminated. Findings on June 18, 2024: a. Kitchen - there was not a minimum 2" air gap between the icemaker drain pipe and the floor drain. 6. 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 June 18, 2024: a. Kitchen - the escutcheon ring on the sprinkler head in the front of the area dropped leaving a gap in the fire resistant rated ceiling. This was corrected at the time of survey. b. Kitchen Pantry - there is a 1/2" diameter hole at the sprinkler head near the icemaker drain. c. There is a small hole at the base of the exit sign at the cross corridor doors by Room 302. 7. Based on observation there is a failure to maintain the building's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be affected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on June 18, 2024: a. Kitchen Pantry - there was a large heavy cardboard box holding the pantry door open.	C 189		

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C 189	Continued From page 6 When the box was moved, a metal wedged device was found holding the door open. Both items were moved at the time of survey. 8. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on June 18, 2024: a. Courtyard - the emergency light at the gate was full of dirty water.	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 failed to provide exhaust ventilation in required spaces. This could affect occupants of the facility if odors were to permeate the facility's occupied areas	C 199		

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C 199	Continued From page 7 beyond the ventilated space. Findings on June 18, 2024: a. 200 Hall Janitor's Closet - there is no exhaust ventilation in this space. b. 300 Hall Resident Laundry - there is no exhaust ventilation in this space.	C 199		