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	HAL046004	A. BUILDING: **01** B. WING _____	**10/02/2024**

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C 000	Initial Comments Report of a Construction Section Biennial Survey conducted by Suzanna Fay on October 2, 2024. Records indicate this facility was first licensed on November 26, 1997 as a Home for the Aged for 60 Beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1997 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited and a Plan of Corrections is required.	C 000	Response to cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusions set forth in the Statement of Defeciencies of Corrective Action Report; the Plan of Correction is prepared solely as a matter of compliance with State Law.	
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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Observations revealed that the facility is not in compliance with code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. For licensed facilities equipped with special locking, a wiring diagram and system components location map shall be provided under glass adjacent to the fire alarm panel. Findings on October 2, 2024: a. There is not a systems component map at the FACP location.	C 101	1.a. Their is a copy of the componenet map located by the FACP.	11/22/24
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 interview and review of records, it was revealed that the facility did not have current fire and building safety inspection reports maintained in the home and available for review. Findings on October 2, 2024: a. The most recent Fire Official Inspection Report was dated February 25, 2020.	C 111	Fire Marshall inspection has been completed on 11/12/24 with no deficiencies.	11/12/24
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL	C 160		

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C 160	Continued From page 2 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 outside premises were not maintained in a clean and safe condition. Findings on October 2, 2024: a. 300 Hall Porch - there was an active wasp nest over the exit door. There was a hole where the escutcheon ring was missing on the center sprinkler head. Wasps were active on the head. The ceiling at the center head was damaged and the finish was flaking off. The finish on the porch ceiling to the left of the door was splitting and flaking. There were large spider webs around the door and along the exterior walls. b. There is a large presence of lint from the Laundry Room dryer on the roof around the exhaust. c. Smoking Porch - there are dozens of cigarette butts tossed onto the dry grass at the edge of the porch.	C 160	1. a. Wasp nest removed over exit door. The excutcheon ring has been replaced to sprinkler head and wasps were removed. The spinder webs have been removed from around door and exterior walls. 1.a. Maintenance Tech is in process of the repair of the ceiling porch and door to 300 hall exit porch. 1.b. The lint from laundry room dryer on the roof has been cleaned from around exhaust. 1.c. Cigarette butts have been cleaned from the grass edge and porch.	10/3/24 11/20/24 10/3/24 10/4/24
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		

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C 164	Continued From page 3 (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 October 2, 2024: a. Room 201 - there were spider webs wrapped around the sprinkler head. b. Room 301 - there is a 6" diameter yellow water stain on the ceiling at the smoke detector. There is a small black stain within the water stain. c. Kitchen - there is a heavy accumulation of grease and dust on the Return Air [R/A] grille beside the hood. d. Laundry - there is a heavy accumulation of lint on the radiation dampers inside the exhaust fan and R/A ducts.	C 164	1.a. Spider webs have been removed from around sprinkler head. 1.b. The water stain from the ceiling in room 301 has been repaired. 1.c. The grease has been cleaned from the grille hood. 1.d. The accumulation of lint on the radiation dampers have been cleaned.	10/4/24 11/14/24 11/13/24 10/4/24
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 facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from	C 166		

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C 166	Continued From page 4 falling or being knocked over may present a danger to the occupants of the facility. Findings on October 2, 2024: a. Oxygen Storage - there was one oxygen bottle, unsecured on the floor. This was corrected at the time of survey. 2. Based on observation the facility is not maintained free from hazards. If the code required clearance of 36" in front of electrical breaker panels is not maintained it could delay timely operation of the breakers in an emergency situation. Findings on October 2, 2024: a. Med Room - there is a table with a small refrigerator on it sitting in front of one of the electrical panels. There is a med cart stored in front of two more panels. The cart was moved at the time of survey.	C 166	1.a. Oxygen bottles have been secured as noted at time of survey. 2.a. The cart was moved at time of survey and corrected at time of survey.	10/2/24 10/2/24
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. Observations revealed that the electrical equipment was not maintained in a safe and	C 189		

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C 189	Continued From page 5 operating condition. Findings on October 2, 2024: a. Front Porch - the emergency light is not secure at the ceiling and one of the bulbs is dangling from its wires. 2. Observations revealed that the plumbing equipment was not maintained in a safe and operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility. Findings on October 2, 2024: a. Room 201 Bathroom - the toilet is not secure to the floor. b. Room 404 Bathroom - the toilet is not secure to the floor. 3. 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 October 2, 2024: a. The sprinkler head outside of the Salon was missing its escutcheon ring. b. There is a hole at the base of the sprinkler head outside of Room 210. c. Executive Director's Office - there is an unsealed cable penetration in the back corner of the room. d. Riser Room - the sprinkler head is missing its escutcheon ring leaving a gap in the fire resistant rated ceiling. e. There is an small unsealed cable penetration in the corridor ceiling outside of Physical Therapy. f. Activity Room - the escutcheon ring has	C 189	1.a. Front porch emergency light has been secured and bulb repaired. 2.a. Toilet has been secured to the floor in 201. 2.b.Toilet has been secured to floor in 404. 3.a. The escutcheon ring sprinker head has been replaced. 3.b. The hole has been repaired to sprinkler head outside of room 210. 3.c. The unsealed cable has been sealed. 3.d. The escutcheon ring has been replaced in the riser room. 3. e. The cable penetration has been sealed. 3. f. The escutcheon ring has been replaced to the activity room.	10/3/24 11/13/24 11/13/24 11/14/24 11/7/24 10/3/24 11/14/24 10/3/24 11/14/24

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C 189	Continued From page 6 dropped leaving a gap in the fire resistant rated ceiling. g. Business Office - the escutcheon ring has dropped down and the sprinkler head appears to have dropped and does not hang straight. h. The sprinkler head outside of the Med Room is missing its escutcheon ring. 4. 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 October 2, 2024: a. Room 210 - the door rubs on the floor making it difficult to close and latch. 5. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating due to sprinkler heads being obstructed could affect occupants in the fire compartment if the sprinkler head could not suppress a fire. Findings on October 2, 2024: a. 300 Hall Porch - there was debris and wasps crawling around the center head and there was a large, active wasp nest constructed on the head to the right of the doors. b. Laundry - there is a heavy accumulation of lint on the sprinkler head near the dryer. 6. 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	C 189	3.g The escutcheon ring has been repaired to the sprinkler head. 3.h. The escutcheon ring has been replaced. 4.a. The foor has been repaired so that the door is not rubbing and latches without difficulty. 5.a. The debris and wasps have been cleaned up around the doors. 5.b. The accumulation of lint on the sprinkler head has been cleaned.	11/14/24 11/14/24 11/14/24 11/13/24 10/8/24

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C 189	Continued From page 7 exits were not illuminated during a power outage. Findings on October 2, 2024: a. Exterior Electrical Room - the emergency light did not illuminate on test. b. Living Room - the emergency light behind the television did not illuminate on test. 7. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment could not operate properly to suppress a fire. Findings on October 2, 2024: a. Kitchen - the sprinkler heads in the kitchen are corroded. b. Kitchen - the sprinkler head by the hood has dropped and is corroded. c. Physical Therapy - the sprinkler head is heavily corroded. d. Staff Bath - the head is recessed and the gap around the head was filled with ceiling putty. There is paint on the head.	C 189	6.a. Emergency light has been repaired and will illuminate. 6.b. The Emergency light behind the television has been repaired and will illuminate. 7.a-d A vendor (VSC) has been contacted to repair sprinkler heads.	10/17/24 10/17/24 11/22/24
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;	C 199		

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C 199	Continued From page 8 (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. Findings on October 2, 2024: a. Kitchen Housekeeping - the exhaust fan is not working. b. Staff Bath - the exhaust fan is not working.	C 199	1a. The exhaust fan in the kitchen has been repaired. 1b. the exhaust fan has been repaired in the staff bath.	11/11/24 11/11/24