STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL092144	A. BUILDING: **01** B. WING _____	**10/24/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WAKE ASSISTED LIVING	**2800 KIDD ROAD** **RALEIGH, NC 27610**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on October 24, 2024. This facility was licensed on February 26, 1986 and is currently licensed as a 60 Bed Special Care Unit. 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 1978 (1986 Revision) Edition of the North Carolina Building Code, Institutional Occupancy, and the 1984 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. Deficiencies have been cited and a Plan of Correction is required.	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;	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, for any required emergency release switch that is of the locking type, all staff that are responsible for the evacuation of the occupants of the locked unit must carry emergency release switch keys. Findings on October 24, 2024: a. The emergency release switches at the doors were keyed switches. None of the staff interviewed carried the emergency switch key.	C 101		
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 walls, ceiling and floors were not kept clean and in good repair. Findings on October 24, 2024: a. Room 127 Shared Bath - the door frame is rusting along the bottom leaving jagged rusty metal edges exposed.	C 164		

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C 164	Continued From page 2 b. Room 128 Shared Bath - there is a 2" x 8" section of floor tile missing at the base of the toilet. c. Kitchen - there is a heavy accumulation of dust built up on the return air grille near the corridor door. d. Kitchen - the ceiling finish is bubbled and flaking between the hood and the the warming station. There is a large bubbled area on the wall between the Kitchen and Dining Room. d. Dining - the ceiling is cracking at the sheetrock joints near the window wall and the popcorn finish is bubbled up around the cracks. There is moisture coming into the room at the exterior wall where the wall jogs. It is causing the paint to bubble and flake and the chair rail to rot. Interview with staff revealed that the flashing around the fire wall and the roof penetrations is leaking and they are working to resolve the water migration problems.	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 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 3 falling or being knocked over may present a danger to the occupants of the facility. Findings on October 24, 2024: a. Nurses Station - there was one unsecured oxygen bottle sitting on a scale. This was removed at the time of survey.	C 166		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND 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. Observations revealed that each bedroom or adjoining bathroom did not have towel bars in good repair for each resident. Findings on October 24, 2024: a. Room 128 Shared Bath - three of the four towel bars were broken. b. Room 115 Shared Bath - one of the four towel bars was broken.	C 175		
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	C 189		

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C 189	Continued From page 4 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 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 October 24, 2024: a. The emergency light by Shower #2 did not illuminate on test. b. The emergency light at the Nurses Station did not illuminate on test. c. East Wing - the emergency light by Dining did not illuminate on test. d. Activity Room - the emergency light over the cabinetry did not illuminate on test. e. Dining Room - the emergency light at the corridor wall did not illuminate on test. 2. 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 24, 2024: a. Room 130 - the plate at the latch is rubbing on the strike plate requiring excessive force to close and open. b. Room 126 - the hinge is loose and the door hits the top of the frame and does not close and	C 189		

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C 189	Continued From page 5 latch. c. Room 114 - the door is rubbing on the frame and does not close and latch. 3. Observations revealed that the plumbing equipment shall be maintained in a safe and operating condition. Findings on October 24, 2024: a. Room 115 Bath - the sink is detaching from the wall. b. Beauty Salon - the sink is out of order as it is being repaired for leaking faucets. 4. 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 resident room doors must not have gaps or holes within the face of the door. Findings on October 24, 2024: a. Medical Supply Room across from the Resident Restroom - the door knob does not fit the opening and there is a sliver of a hole at one side of the door knob. 5. 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 the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on October 24, 2024: a. West Hall - the right hand door of the fire doors is not latching when released by the fire alarm. b. East Hall - the left hand door of the fire doors is not latching when released by the fire alarm.	C 189		

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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. Findings on October 24, 2024: a. Room 128 Shared Bath - the exhaust fan is not working. b. Employee Restroom - the exhaust fan is not working. c. Laundry - the exhaust fan is not working.	C 199		