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	HAL049030	A. BUILDING: **01** B. WING _____	**09/18/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SUMMIT PLACE OF MOORESVILLE	**128 BRAWLEY SCHOOL ROAD MOORESVILLE, NC 28117**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on September 18, 2024. Records indicate this facility was first licensed as a Home for the Aged, on December 23, 1997. The facility is currently licensed for a total of sixty bed capacity, which includes a twenty bed Special Care Unit. Therefore, we are requiring this facility to meet the 1996 Rules for the Licensing of Adult Care Homes, applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds and the 1996 North Carolina State Building Code; Section 409.1 - Group I-Institutional Unrestrained 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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation and interviews with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations.The 2002 NC State Building Code requires gates in a means of egress to meet the requirement for doors. Doors equipped with magnetic locking are required to unlock upon activation of the Fire Alarm System and the central emergency release. Findings on September 18, 2024: a. Exterior, Back Courtyard Gates - activation of the fire alarm system did not release the gates. In addition, activation of the central emergency release switch did not release the gates.	C 101	Exterior, Back Courtyard Gates will be repaired and release as required	12/15/24
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 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, the building was not maintained in a safe and operating condition, because obstructions impeded egress. This would affect all if they could not promptly exit during an emergency. Findings on September 18, 2024: a. 200 Hall, SCU Exit near Bedroom 230 - the panic hardware device would not release the door when the touch bar was actuated. The Maintenance Director repaired the panic hardware allowing the door to open.	C 150	The Facilities Director repaired the panic hardware allowing the door to open.	9/18/2024

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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 mechanical systems were not kept clean and in good repair. Findings on September 18, 2024: a. Entire Building - Most Bathrooms and Restrooms- the exhaust ventilation system grilles with their radiation dampers had an excessive accumulation of dust/lint. 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 September 18, 2024: a. 200 Hall, SCU Utility Room - the utility sink's (hopper) P-Trap had very little water visible. Without water in the P-Trap, sewer gases will travel into the building.	C 164	The exhaust ventilation systems were cleaned and in good repair. 200 Hall, SCU Utility Room, sink was checked and repaired to ensure there was water allowed in the p trap.	11/1/2024 11/30/24
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	C 166		

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C 166	Continued From page 3 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 floor was not uncluttered, and free of all obstructions and hazards. Findings on September 18, 2024: a. Admin Hall, Beauty Shop - an extension cord was wadded-up on the floor along with a relocatable power tap (RPT), and the four cords attached to the RPT. The wad of wires and RPT were a tripping hazard. 2. Based on Observation and interview with Executive Director and Maintenance Director, the Building was not maintained free of hazards because accessible for inspections was denied. This will prevent any deficiency that may be discovered with regular inspections from being corrected. Findings on September 18, 2024: a. 200 Hall, SCU Medical Records Room - there was no key on-site to allow access into this area for inspection.	C 166	The extension cord was removed and cords secured for safety. Medical Records Room locked replaced All rooms re-keyed with master key access.	11/1/2024 11/30/24 12/30/24
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	C 189		

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C 189	Continued From page 4 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 Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection, activation and release of doors held open by the fire alarm system. Findings on September 18, 2024: a. Admin Hall, Service Hall Kitchen - a smoke detector near the hood was covered with grease laden lint. 2. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on September 18, 2024: a. 100 Hall, Med Closet near Old Nurse Station - the self-contained emergency light did not illuminate on backup power when tested. b. 100 Hall, Corridor near Maintenance Office - the exit sign did not illuminate on backup power when tested. c. 100 Hall, Game Room - the exit sign did not illuminate on backup power when tested. d. 100 Hall, Mech Room - the self-contained emergency light did not illuminate on backup power when tested. e. 200 Hall, SCU Entrance Door - the exit sign did not illuminate on backup power when tested. f. 200 Hall, SCU Dining Room Exit - the exit sign did not illuminate on backup power when tested. g. 200 Hall, SCU Manager Office - the self-contained emergency light did not illuminate on backup power when tested.	C 189	Smoke detector in service hall cleaned and in working condition 100 hall corridor exit sign replaced, 100 hall game room exit sign replaced , 100 hall mechanical room replaced, 200 hall SCU entrance door exit sign battery replaced, 200 hall SCU dining room exit sign replaced, 200 SCU manager office replaced, 200 SCU hall near manager office replaced, 200 hall SCU near 217 replaced and completed	11/15/2024 11/1/2024

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C 189	Continued From page 5 h. 200 Hall, SCU Corridor near Manager Office - the self-contained emergency light did not illuminate on backup power when tested. i. 200 Hall, SCU Exit Door near Bedroom 217 - the exit sign did not illuminate on backup power when tested. 3. Based on observations, the fire-resistance-rated construction separations providing protection from hazardous areas were not being maintained in a safe and operating condition by not providing the fire-resistant-rated construction required. This could affect all if smoke/flames are not contained to the room of origin. Findings on September 18, 2024: a. Admin Hall, Service Hall Mech Room - the 45 min fire-rated, and self-closing door did not close and latch into its frame using its own power. b. Admin Hall, Service Hall Bulk Laundry - the self-closing corridor door was being held open with a wedge. Fire rated doors must stay closed or be held open with a hold-open device that releases on fire alarm activation. Facility Staff corrected this deficiency before the Construction Surveyor left the site. c. Admin Hall, Service Hall Housekeeping - the self-closing corridor door was being held open with a broom handle jammed in between the door leaf and the frame. Fire rated doors must stay closed or be held open with a hold-open device that releases on fire alarm activation. Facility Staff corrected this deficiency before the Construction Surveyor left the site. d. Admin Hall, Service Hall Housekeeping - the 45 min fire-rated, and self-closing door did not close and latch into its frame using its own power. 4. Based on observations, the building fire safety was not maintained in a safe and operating	C 189	Admin Hall door was repaired and is closing Admin hall, service hall bulk laundry is closed Admin Hall-service hall housekeeping door was closed and corrected Admin Hall Service hall was repaired and is closing and is latching into frame.	11/30/24 9/18/24 9/18/24 11/30/24

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C 189	Continued From page 6 condition. This could expose all to fire/smoke if not contained in the room of origin. Findings on September 18, 2024: a. Admin Hall, Activity - there were at least twelve holes, which penetrated through the one-hour fire-resistance-rated ceiling where the lights were removed. b. Admin Hall, Service Hall Mech Room - a gas pipe penetrating the fire-resistance-rated ceiling assembly was sealed with orange foam. Orange foam has not been approved to seal penetrations in fire-resistant-rated construction. c. 200 Hall, SCU Mechanical Room near Dining - there was a conduit not firestopped as it penetrated the fire-resistance-rated ceiling assembly. 5. 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 September 18, 2024: a. Admin Hall, Service Hall 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. b. Kitchen - the commercial kitchen hood's fire suppression system manual actuator (pull station) was obstructed with a free-standing four feet long by three feet high shelf. Facility Staff corrected this deficiency before the Construction Surveyor left the site.	C 189	Lights have been replaced and holes corrected. Admin Hall Med Room orange foam is accepted fire rated and resistant rated. 200 SCU Mechanical room conduct was sealed to the fire rated ceiling Annual Kitchen hood suppression system inspection completed Shelf obstruction removed and corrected	11/15/24 9/18/24 11/15/24 10/1/2024 3/18/24

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C 189	Continued From page 7 6. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on September 18, 2024: a. Admin Hall, Activity - the pair of doors to the corridor were not equipped with positive latching hardware. b. Admin Hall, Dining - the pair of doors to the corridor were not equipped with positive latching hardware. c. 100 Hall, Bedroom 100 - the corridor door did not close and latch without extra effort and force. d. 100 Hall, Resident Laundry (<100) - the corridor door cannot latch into its frame as the latch bolt was missing. e. 100 Hall, Bedroom 123 - the corridor door did not close and latch without extra effort and force. f. 200 Hall, Bedroom 200 - the corridor door did not latch into its frame when closed. g. 200 Hall, Bedroom 205 - the corridor door did not close and latch without extra effort and force. h. 200 Hall, Bedroom 206 - the corridor door did not latch into its frame when closed. i. 200 Hall, Bedroom 207 - the corridor door hits its frame and will not close and latch into its frame. j. 200 Hall, SCU Dining Courtyard Gate - the gate hits the ground preventing it from opening more than thirty degrees 7. Based on Observation, the Building was not kept in good repair, because some building components are broken, exposing sharp edges which could potentially cause injury. Findings on September 18, 2024: a. Admin Hall, Smoke Barrier - one of the fire exit hardware devices was missing its end cap. b. 100 Hall, Smoke Barrier - one of the fire exit hardware devices was missing its end cap. c. 200 Hall, Smoke Barrier - one of the fire exit	C 189	Pair of doors have been replaced with positive latching hardware. Pair of doors in the admin hall dining corridor were repaired with positive latching hardware. 100 hall bedroom 100 was repaired and does shut and close without extra effort or force 100 hall resident laundry the latch bolt was missing and has been repaired 100 hall, bedroom 123 was repaired and latches without extra force or effort. 200 hall, Bedroom 205 was repaired and latches without extra effort or force. 200 hall, bedroom 206 was repaired and latches into the frame when closed. 200 hall, bedroom 207 was repaired and now latches into its frame. 200 Hall SCU dining courtyard gate was repaired and now opens without obstruction. Admin Hall, fire exit hardware device replaced. 100 hall, smoke barrier fire exit hardware device cap replaced. 200 hall, smoke barrier device cap replaced.	11/15/24 11/30/24 11/30/24 11/30/24 11/12/24 11/3024 11/30/24 11/30/24 11/30/24 12/1/24 12/1/24 12/1/24

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C 189	Continued From page 8 hardware devices was missing its end cap. 8. Based on observations, the Facility failed to have preventative measures to keep Mechanical Rooms free of combustible storage items. Findings on September 18, 2024: a. 200 Hall, SCU Mechanical Room near Dining - combustible materials like a mattress and a full sheet of plywood, were being stored in this room. 9. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on September 18, 2024: a. Admin Hall, Dining Room Porch near Activity Door - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power; therefore, testing for ground fault could not be performed. b. Admin Hall, Beauty Shop - the relocatable power tap was not connected directly to permanently installed branch circuit electrical power receptacle. c. 100 Hall, Porch near Bedroom 108 - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power; therefore, testing for ground fault could not be performed. d. 100 Hall, Porch near Bedroom 128 - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power; therefore, testing for ground fault could not be performed. e. 200 Hall, Bedroom 202 - the light fixture was missing its globe. f. 200 Hall, Porch near Bedroom 207 - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power; therefore, testing for ground fault could not be performed.	C 189	200 Hall, SCu Mechanical room has been cleared of all items. Admin Hall, Dining room porch GFCI has been repaired and is in working condition Admin Hall, Beauty shop the power tap has been connected directly to permeant installed branch circuit. 100 Hall, porch near bedroom 108 GFCi is working properly 100 hall, Porch near Bedroom 128 GFCI repaired and working properly. 200 Hall Bedroom 202 missing globe has been replaced 200 hall, porch near bedroom 207 GFCi has been repaired and working properly.	11/15/24 12/15/24 12/15/24 12/15/24 12/15/24 11/15/24 12/15/24

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C 189	Continued From page 9 10. 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 September 18, 2024: a. Admin Hall, Service Hall Bulk Laundry-Dryer Room - the fire sprinkler head was loaded (covered) with lint and debris. b. Admin Hall, Dining - a fire sprinkler escutcheon plate had dropped, exposing an opening through the fire-resistance-rated ceiling. c. 100 Hall, Clean Linen - a fire sprinkler escutcheon plate had dropped, exposing an opening through the fire-resistance-rated ceiling. d. 200 Hall, Corridor near Bedroom 204 - a fire sprinkler escutcheon plate had dropped, exposing an opening through the fire-resistance-rated ceiling.	C 189	Admin Hall, Dining fire sprinkler head has been cleaned Admin hall dining fire sprinkler escutcheon was replaced covering exposed hole. 100 Hall, clean linen fire sprinkler escutcheon plate has been replaced and problem has been corrected. 200 hall, corridor near bedroom 204 fire sprinkler escutcheon plate has been replaced and problem has been corrected.	10/30/24 11/30/24 11/30/24 11/30/24
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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:	C 195		

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C 195	Continued From page 10 1. Based on Observation, the hot water at fixtures used by residents was not maintained in the operating temperature range from 100 degrees Fahrenheit to 116 degrees Fahrenheit. Findings on September 18, 2024: a. 100 Hall, Bedroom 102 now Med Room - the sink's hot water temperature reached 128 degrees Fahrenheit. b. 200 Hall, Bedroom 202 - the sink's hot water temperature reached 122 degrees Fahrenheit.	C 195	Hot water temperatures have been corrected. One circulating pump and two mixing valves were replaced.	10/1/24