STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL066012	A. BUILDING: 01 B. WING _____	10/02/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HAMPTON MANOR	320 BROUGHTON STREET GASTON, NC 27832

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on October 2, 2024. This facility was first licensed for the home for the Aged on March 6, 1997. The rear addition to this facility was completed and certified on April 4, 2001. The current capacity is 82 beds including a 40 bed Special Care Unit. Therefore, the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 NC State Building Code for Institutional Unrestrained Occupancies. 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; This Rule is not met as evidenced by:	C 101		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Glenda Mejette, Executive Director | 11-14-24

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C 101	Continued From page 1 1. Based on observation, the facility does not meet code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. Exits and exit access doors shall be marked by an approved exit sign readily visible from any direction of egress travel. Findings on October 2, 2024: a. Smoke barrier doors by Room 117 - there is not a readily visible exit sign illuminating the path of egress on the North Hall side of the cross corridor doors. 2. Observations revealed that the facility does not meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. Electromagnetic locks shall have an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors in the facility. Release switches shall be located and properly identified at each nurses station serving the locked unit. Findings on October 2, 2024: a. SCU Nurses' Station - the on/off emergency switch was not identified.	C 101	Exit sign is now visible by room 117 on North Hall has been installed and is now visible and working The on/off emergency switch by the SCU nurse's station now has a label And is identifiable Fire Inspection was done by inspector on 11-13-24. Report is available Planter box on the outside grounds has been repaired with new wood and painted. Room 104- both drawers has been repaired and no nails are visible. Tile has been repaired in the left visitors Toilet. New tile was placed Dietary office- black microbial spots has been painted- no visible spots SCU- all cobwebs and dead insects has been cleaned From the areas. areas were also power washed for additional cleaning. Room 126 shower- handrail by the toilet- handrail was tightene The sprinkler system was repaired on October 10. Fire watch was initiated on October 2,2024 due to the sprinkler System was down. Firewatch log has been implemented	11-14-24 11-14-24
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.	C 111		

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C 111	Continued From page 2 This Rule is not met as evidenced by: 1. Review of records 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 current Fire Official's Inspection Report was dated September 20, 2022.	C 111	Firewatch ended on 10-10-24. Front hall- Nurses Station- 2"inch diametter hole by The corridor wall- area was fire caulked Laundry- all screws were replaced- no gaps are Present Kitchen freezer was de-iced and new insulation lines was installed Walk-in cooler freezer floor- rust was removed- floor was sanded. Floor was sprayed with anti-rust Reformer Air conditioner units-outside of laundry- installed drainpipes to keep the water away from the building Installed new switch for SCU magnetic lock in Courtyard on exit gate SCU bath sink- unclogged sink- sink was cleaned Room 134- repaired door so door won't drag Beauty salon- diverter valve was adjusted back to correct Temperature	11-14-24 11-14-24
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. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on October 2, 2024: a. The wood siding around the planter box is rotting and splitting.	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;	C 164		

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C 164	Continued From page 3 (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 furniture was not kept in good repair. Findings on October 2, 2024: a. Room 104 - a section of trim between two drawers in the built-in chest of drawers has broken off leaving nails exposed. 2. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair. Findings on October 2, 2024: a. Visitors' Toilet (left)--there is one cracked and chipped tile in front of the sink. b. Dietary Office - there are black microbial spots on the ceiling around the sprinkler head. c. SCU - there were cobwebs with dead insects along the ceiling and corridor wall of Room 132 as well as in the TV Room at the end of the SCU corridor.	C 164	Maintenance Manager and Executive Director will do daily rounds to ensure that facility is in compliance with State rules and regulations. Checklist will be reviewed by Maintenance and Executive Director daily for any deficiencies	
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.	C 166		

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C 166	Continued From page 4 This Rule is not met as evidenced by: 1. Observations revealed that the facility was not free of all hazards. Unsecured handrails can cause injury from a fall if the rail failed to support the weight of the occupants of the facility. Findings on October 2, 2024: a. Room 126 Shower - the handrail by the toilet is not secure to the wall.	C 166		
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 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 did not function to suppress a fire. Findings on October 2, 2024: a. The sprinkler system is down due to leaks on the system and has been down since approximately April of this year. The facility did not alert the Fire Marshal's office and were not conducting fire watches at the time of the survey.	C 189		

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C 189	Continued From page 5 The surveyor contacted Emergency Services and the Fire Marshal responded and placed the facility under a fire watch. 2. 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 or walls could allow fire and smoke to spread beyond the area of origin. Findings on October 2, 2024: a. Storage by Nurses' Station - there is an unsealed 2" diameter hole through the corridor wall for a cable penetration. b. Laundry - the screws are stripped on the vent between the exit doors so that the vent is loose and leaves a gap in the fire resistant rated ceiling. 3. Observations revealed that the mechanical equipment is not maintained in a safe and operating condition. Findings on October 2, 2024: a. The condensate lines for the Kitchen freezer unit are freezing up on the outside and inside. b. Kitchen - the entire floor of the walk-in cooler is rusted. c. The air conditioning units outside of Laundry have an excessive amount of water collecting around and behind the units. There is a black scum on the surface of the water and there is a green residue on the surface of the mud creating a habitat for pests to breed. 4. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. SCU courtyards are required to be secure. Exits or gates with magnetic locking that is not functioning allows for the	C 189		

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C 189	Continued From page 6 possibility of elopement. Findings on October 2, 2024: a. SCU Courtyard - the magnetic locking device at the gate has failed and the door is not locking to secure the courtyard. 5. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Clogged sink drains prevents residents and staff from being able to wash their hands. If the sink overflows, it will allow contaminated water to spread over the floor and other fixtures or furnishings. Findings on October 2, 2024: a. SCU Bath #2 - the sink is clogged and full of discolored water. 6. 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 134 - the door drags heavily on the floor requiring excessive force to close and open.	C 189		
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	C 195		

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C 195	Continued From page 7 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: 1. Based on observation and testing, the hot water system was not maintained at a temperature between 100 degrees F and 116 degrees F. Findings on October 2, 2024: a. Beauty Salon - the water temperature at the sink was 119 degrees F. The temperature was adjusted at the time of survey.	C 195		