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	HAL011369	A. BUILDING: 01 B. WING _____	09/18/2024

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CANDLER LIVING CENTER	136 ROBINSON COVE ROAD CANDLER, NC 28715

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay conducted on September 18, 2024. A Follow Up Biennial Survey was conducted at the same time. Records indicate this facility was first licensed on January 1, 1977 for 29 beds. Based on this information, we are requiring the facility to meet the 1967 NC Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the 2005 rules for Adult Care Homes of Seven or More Beds. Deficiencies were cited. 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 current fire and building safety inspection reports maintained in the home and available for review. Findings on September 18, 2024: a. The most recent Fire Official's inspection report was dated May 27, 2022.	C 111	C 111 The operation manager and maintance director will together insure the fire and building safety inspection will be in the building and ready available upon request. The operation manager will monitor monthly and	

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C 150	Continued From page 1	C 150	C111 Record on a check list. C150 The staff have been educated on the importance of keeping corridors clear. The operation manager will monitor and keep a record on a weekly ~~base~~ basic. 9/30/24	
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. Observations revealed that the corridors were not free of all equipment and other obstructions. A six foot clear corridor width is required. Not maintaining the six foot requirement could cause harm to the occupants of the facility if the equipment blocked egress to the exit doors. Findings on September 18, 2024: a. Exit by Laundry - a cleaning cart was parked in the corridor reducing the corridor width to less than six feet clear.	C 150		
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. Based on observation, the outside grounds of the facility have not been maintained in a clean and safe condition. Findings on September 18, 2024:	C 160	C160 Currently the facility is waiting on a Contractor to give the cost of repairs Until the the maintance director will monitor areas of concern weekly and document any new needs. 11/15/24	

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C 160	Continued From page 2 a. Exterior, left side, back addition - the fascia trim is rotting and deteriorating along the entire length of this section of the building. A section of the exterior soffit is broken and hanging from the facility. b. Exterior, exit near Dining - a section of the downspout has broken off and water is dripping from the gutter onto the walkway. c. Exterior, right side, back addition - the fascia trim is rotting and deteriorating along the entire length of this section of the building. The soffit panels are loose and detaching from the facility. d. Right side near Pantry door - the window well housing has collapsed allowing water to collect in the window well. e. Old Pump House - the door is broken leaving the pump pit exposed. Residents are throwing trash down into the well. There is a 5'-0" drop to the bottom of the pit that could cause injury if one of the residents fell into the opening.	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; (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 walls, ceilings and floors were not kept clean and in good repair.	C 164	C164 Management will do monthly walk thru to monitor any repairs that need addressed. Documentation will show findings and completed date. 11/15/25	

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C 164	Continued From page 3 Findings on September 18, 2024: a. Bedrooms, typical - the VCT floors were painted. The paint finish is flaking and peeling in the high traffic areas of the bedrooms. b. Bedroom 2 - there is a rise in the floor between the beds. The vinyl plank flooring has cracked and chipped at the bump leaving the subfloor exposed. c. Bedroom 2 - there is a 2" diameter hole in the wall behind the door. The cover plate for the hole has fallen off. d. Tub Bath across from Room 3 - a 30" section of the door frame trim has broken off and the remaining trim is pulling away from the door. e. Corridor to Kitchen - the flooring material in front of the Kitchen door is chipped and torn. There is a 12" section of the floor and subfloor chipped out at the threshold. f. Kitchen Pantry - the section of wall base behind the water heater has deteriorated due to water damage. g. Corridor outside Staff Bath - the ceiling has cracks and chips and the current patch is not finished leaving the backing exposed and pulling away from the ceiling. h. Room 10 - the section of wall base behind the sink is missing. i. Bath 2 - there is a heavy presence of microbial growth on the closet ceiling and a few small spots of mildew on the ceiling in front of the shower. 2. Observations revealed that the furnishings were not kept clean and in good repair. Findings on September 18, 2024: a. Community Bath beside Laundry - the grab bar at the toilet is heavily corroded. b. The handrail between Rooms 11 and 13 is loose and could cause injury if it did not support the weight of the staff, residents or guests of the	C 164	C164 11/15/25 11/15/25 12/31/24 12/31/24 11/15/25 12/31/24 11/15/25 12/21/24 12/31/24 12/31/24 12/17/24	

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C 164	Continued From page 4 facility. c. Bath 2 - the right side of the vanity cabinet is soft and the finish is rubbing off.	C 164		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Review of records revealed that the facility was not conducting quarterly fire rehearsals on each shift. Findings on September 18, 2024: a. Interview with staff revealed that they worked three shifts. The fire rehearsal form showed that there were only two shifts. The fire rehearsal log showed that the facility conducted a fire rehearsal on three shifts the last quarter of 2023. There was only rehearsals logged in on the first and second shifts of the first and second quarters of 2024.	C 185	C185 Operation Manager will work closely with maintance director to insure required fire drills are preformed. These drills will be documented and available upon request. 12/31/24	
C 189	Building Equipment Maintained Safe, Operating	C 189		

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C 189	Continued From page 5 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 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 September 18, 2024: a. Living Room - the ceiling panels are separating at the attic access panel leaving a hole in the fire resistant rated ceiling. b. There is an unsealed conduit penetration in the ceiling above the wall radiator between Rooms 11 and 13. c. There is an unsealed cable penetration in the ceiling at the WiFi box between Rooms 8 and 10. 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 September 18, 2024: a. Room 2 - the door rubs at the top of the frame	C 189	C 189 Management will preform Monthly walk thru to insure the fire safety systems is in a safe condition Documentation will reflect any issues and completed date of repair. 12/31/24	

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C 189	Continued From page 6 requiring excessive force to close and it is causing the door veneer to separate from the door. b. Room 6 - the door does not have a latch plate and the door does not latch when closed. c. Room 14 - one of the screws is missing on the latch plate so that it moves and prevents the door from latching. d. Bath 2 - the door is swollen and does not close and latch. 3. Based on observation, the plumbing equipment is not maintained in a safe and operating condition. Findings on September 18, 2024: a. Tub Bath across from Room 3 - the tub controls and faucet are not secure and move freely when touched. b. Tub Bath across from Room 3 - the sink piping is leaking at the wall connection and the drip is staining the floor and base a dark orange color. c. Community Bath near Laundry exit - the shower floor drain is dislodged creating a trip hazard. d. Laundry - one of the drain lines for the washing machine is leaking and there is water covering approximately half of the floor. 4. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. A build up of grease on the kitchen hood vents increases the risk of a fire and decreases the hood's ability to dissipate odors and fumes. Findings on September 18, 2024: a. Kitchen - there is a heavy accumulation of grease on the hood vents.	C 189		

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C 189	Continued From page 7 5. Based on observation there is a failure to install plumbing piping, plumbing devices and equipment in a safe manner or in operating condition. The discharge from the water heater relief valve shall be piped full size and terminate less than 6 inches above the adjacent ground surface using an acceptable material. Failure to maintain or install piping, plumbing devices and equipment in a safe manner or in operating condition could injure occupants of the facility if relief valve discharged. Findings on September 18, 2024: a. Kitchen Pantry - the pressure relief valve on the water heater was not piped. 6. 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 between the door and the door frame stops or holes in the surface of the door. Findings on September 18, 2024: a. Nurse Station - the corridor door is a Dutch door with a gap between the two panels ranging from 1/2" to an inch. b. Room 10 - there is a 1/2" gap between the door and frame at the top right side of the door. 7. Observations revealed that the mechanical equipment is not maintained in a safe and operating condition. Missing dryer caps allow for pests and the elements to enter the facility through the unprotected opening. Findings on September 18, 2024: a. Laundry - the exterior dryer cap is missing from the exhaust duct where it extends out the back wall.	C 189		

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C 189	Continued From page 8 8. 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 September 18, 2024: a. Bathroom between Rooms 11 and 13 - the toilet is not secure to the floor. 9. 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 September 18, 2024: a. The fire door rubs a little on the frame and did not completely close and latch when released by the fire alarm. It did not close and latch 2 out of 3 times it was tested.	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 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	C 195		

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C 195	Continued From page 9 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 facility's hot water system was not adequate to maintain the hot water temperature at all fixtures used by residents between 100 degrees F and 116 degrees F. Findings on September 18, 2024: a. The water temperature taken at the sink of the Community Bath by Laundry was 98 degrees F.	C 195	C195 The maintance director will monitor water temps weekly to insure proper temperture is maintained Documentation will reflect findings	12/31/24
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; (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 there is not an exhaust ventilation in a space required to have exhaust ventilation. This could affect the occupants of the	C 199	C199 The facility is awaiting a reply from a Contractor to give the cost to repair/ install the exhaust ventilation fan.	11/15/24

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C 199	Continued From page 10 facility if odors, moisture, fumes or possible air borne contaminates were not exhausted from the building. Findings on September 18, 2024: a. A Laundry Room was constructed under the porch outside of the Community Bathroom blocking the window in the bathroom so that there is no longer any natural or mechanical ventilation.	C 199		