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	HAL060125	A. BUILDING: **01** B. WING _____	**10/16/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE PARC AT SHARON AMITY	**4025 N SHARON AMITY DRIVE CHARLOTTE, NC 28205**

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay conducted on October 16, 2024. Records indicate this facilty was first licensed on September 14, 1999. The facility is currently licensed capacity for 64 residents. Based on this information, the facility is required to meet the 1996 10 NCAC 42D - Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 10A NCAC 13F - Licensing of Adult Care Homes of Seven or More Beds, and the 1996 (w/revisions) North Carolina State Building Code(s) for a Group I - Institutional Unrestrained Occupancy. Deficiencies were noted which require a Plan of Correction.	C 000	"Responses to the 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 Deficiencies Corrective Action Report; the Plan of Correction is prepared solely as a matter of compliance with State"	
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 does not meet the requirements of NFPA 72. All doors that are required to be unlocked by the fire alarm system shall remain unlocked until the fire alarm condition is manually reset. Findings on October 16, 2024: a. The maglocks on the exit doors all re-magnetized when the fire alarm system was placed in silence mode. b. The hold open devices on the cross corridor doors re-engaged when the fire alarm system was place in silence mode.	C 101	Facility Maintenance manager will repair doors to ensure that when the fire alarm system is engaged that the doors remain unlocked until the fire alarm condition is manually reset.	12/31/24
C 154	Entrances/Exits-Wanderer Alarms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: 1. Based on observation and interview, the facility did not equip each exit with a sounding	C 154	Facility will equip each exit with a sounding device as required	12/31/24

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C 154	Continued From page 2 device as required when there is at least one resident who is disoriented or a wanderer. Findings on October 16, 2024: a. This facility is a Special Care Facility and interview with staff revealed that the facility has at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer and none of the exterior doors have sounding devices on the doors that is activated when the door is opened.	C 154		
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, ceilings and floors were not kept in good repair. Findings on October 16, 2024: a. Computer Room - there was an excessive amount of dust on the exhaust fan grille. b. Dining - the furniture is hitting the back corner wall and damaging the sheetrock finish. c. Dining - the concrete threshold at the exit to the courtyard is broken up creating a trip hazard. d. Chemical Room - the wall has been opened up to repair a leak from above. The wall has not	C 164	Facility will complete the required needs in the following areas of the community to return standards of condition and compliance. a. Computer Room- remove excessive amount of dust on the exhaust fan grille b. Dining- repair the damages from the furniture placement c. Dining- remove the trip hazard at the exit d. Chemical room- Patch wall repairs e. Room 118- Repairs to paint finish f. 200 hall employee bathroom- remove dust on exhaust fans g. Employee bath #2- repair wall h. Corridor outside of Med Tech's Office- repair water stains 2. Community will remove furniture from the community that is no longer in working or in good repair.	12/31/24 12/31/24

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C 164	Continued From page 3 been patched. e. Room 118 - the paint finish is bubbled and flaking at the right side of the door. f. 200 Hall Employee Bathroom, left - there is an excessive amount of dust on the exhaust fan vent. g. Employee Bath #2 - the wall behind the toilet is uneven and damaged along the edge of the cove base. h. Corridor outside of Med Tech's Office - there are multiple large water stains from a mechanical leak. The ceiling is bubbled at one of the stains. 2. Observations revealed that the furniture was not kept in good repair. Findings on October 16, 2024: a. Courtyard off of Dining - one of the black metal chairs is missing one of its seat slats.	C 164		
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 the facility did not provide each bedroom with the minimum furnishings. Towel bars were not available for each resident.	C 175		

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C 175	Continued From page 4 Findings on October 16, 2024: a. Room 104 Bathroom - the towel bar was broken and there were not two bars for two residents.	C 175	Facility will ensure that all bedrooms are furnished with the minimum furnishings by providing each bathroom with a towel bar.	12/31/24
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 quarterly fire rehearsal logs did not include a short description of what the rehearsal involved. Findings on October 16, 2024: a. There was not a short description of what the rehearsal involved included on the fire rehearsal logs.	C 185	Facility will ensure that all quarterly fire rehearsal logs include the following information: date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.	12/31/24
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,	C 189		

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C 189	Continued From page 5 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 did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on October 16, 2024: a. The exit sign outside of the Computer Room did not illuminate on test. b. 100 Hall - the exit sign at the smoke barrier wall by Mechanical/Electrical did not illuminate on test. 2. Observations revealed that the electrical equipment was not maintained in operating condition. Findings on October 16, 2024: a. At the time of survey, the nurse call system was tested and found not to be working. Further investigation revealed that the system was currently off. This was corrected at the time of survey. b. Kitchen - the carbon monoxide detector was beeping. c. The maglock on the front entry gate was not engaging. 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a	C 189	1. Facility maintenance manager will complete the following repairs to the following electrical emergency/safety lighting equipment to be in safe operating condition. a. Exit sign outside of the computer room did not illuminate on test b. 100 hall- the exit sign at the smoke barrier wall by mechanical/electrical did not illuminate on test. 2. Facility Maintenance Manager will complete the following repairs found to not be in operating condition. a. Nurse call system b. Kitchen- replace the carbon monoxide detector was beeping. c. Front entry gate- reengage maglock	12/31/24 12/31/24

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C 189	Continued From page 6 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 16, 2024: a. Room 110 - the hinge is not tight and the door is rubbing on the frame. b. Room 203 - the door is not latching securely. 4. Observations revealed that the plumbing was not maintained in a safe and operating condition. Findings on October 16, 2024: a. Room 211 Bathroom - the water pressure on the sink was extremely low. 5. Observations revealed that the mechanical systems were not maintained in operating condition. Findings on October 16, 2024: a. The lines on the air conditioning unit just outside the courtyard gate were freezing up.	C 189	3. Facility Maintenance manager will make the following repairs to the facility's fire safety equipment in a safe operating condition. a. Room 110- fix the hinge and the door b. Room 203 - fix the door to latch correctly 4. Facility Maintenance manager will make the following plumbing repairs a. Room 211 bathroom- fix water pressure on the sink 5. Facility Maintenance manager will complete the following needs to maintain the mechanical systems in operating condition a. Unfreeze the lines on the air conditioning unit.	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;	C 199		

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C 199	Continued From page 7 (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 16, 2024: a. 100 Hall - the exhaust fans in the resident bathrooms did not appear to be working. b. 200 Hall - the exhaust fans in the resident bathrooms did not appear to be working.	C 199	Facility Maintenance manager will complete the following repairs to the exhaust ventilation in specified spaces. a. 100 hall- repair exhaust fan b. 200 hall- repair exhaust fans in resident bathrooms that do not work	12/31/24