STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL063025	A. BUILDING: **01** B. WING _____	**10/30/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TERRABELLA SOUTHERN PINES	**101 BRUCEWOOD ROAD SOUTHERN PINES, NC 28387**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on October 30, 2024. Records indicate this facility was first licensed as a Home for the Aged, on October 8, 1997. The facility is currently licensed for Ninety-Four (94) Beds, including a Thirty-Eight (38) Special Care Bed facility. Based on this information, we are requiring the facility to meet the 1996 Homes for the Aged and Disabled - Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 Edition of the North Carolina State Building Code, Section 409.1, Special Institutional Occupancy-Group I Unrestrained Occupancy. Deficiencies were cited requiring a Plan of Correction.	C 000		
C 116	Plans Submittals and Approvals SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure. Approval of Construction Documents shall expire after one year unless a	C 116		

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C 116	Continued From page 1 building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division. (d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained. (e) Completed construction or remodeling shall conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder. (f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion. This Rule is not met as evidenced by: 1. Based on interview and record review, the facility did not submit documents and specifications to DHSR Construction Section for review and approval when construction or remodeling was planned. Findings on October 30, 2024: a. SCU BLDG - Interview with the Maintenance Director revealed the facility had replaced the call system with a new call system. Review of DHSR Construction records revealed that no plans or specifications have been submitted.	C 116		

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C 135	Continued From page 2	C 135		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that resident toilet rooms and bathrooms are not utilized for storage or purposes other than those indicated in the Rule. This deficiency affects all residents and staff who would not have the fixtures and/or space for the services needed. Findings on October 30, 2024: a. SCU BLDG D Hall, Spa - this area was utilized to store supplies, a walker a chair, a wheelchair, wheelchair leg rests, and activities games/supplies	C 135		
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, doorways and corridors were not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency.	C 150		

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C 150	Continued From page 3 Findings on October 30, 2024: a. AL BLDG, Corridor near Beauty Salon - there was an unattended medication cart, obstructing the required six-foot wide corridor to four feet. b. SCU BLDG, Kitchen - there were two carts full of supplies obstructing access to an exit door.	C 150		
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 October 30, 2024: a. AL BLDG, Sunroom - the HVAC grille with its radiation damper had an excessive accumulation of dust/lint.	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	C 166		

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C 166	Continued From page 4 facilities. This Rule is not met as evidenced by: 1. Based on Observation, the Building was not maintained free of hazards because the compressed gas cylinders were not properly secured. They may fall and break their valves off. This would turn the compressed gas cylinder into a dangerous projectile. Findings on October 30, 2024: a. AL BLDG 300 Hall, Bedroom 301 - six portable oxygen cylinders were standing up on the floor in a shallow plastic crate not properly secured.	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, and interview, 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 October 30, 2024: a. AL BLDG, Copy Room - the fire alarm panel was showing a trouble signal. Per the	C 189		

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C 189	Continued From page 5 Maintenance Director, the signal indicates a trouble with the phone lines, and the vendor was notified. 2. Based on observations, the fire-resistance-rated construction separations providing protection from incidental 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 in the room of origin. Findings on October 30, 2024: a. AL BLDG 400 Hall, Housekeeping - the 45 min fire-rated door did not close and latch into its frame using its own power. 3. Based on observation, the building was not maintained in proper operating condition, because the exterior doors do not operate properly. This could affect all by delaying egress from the building. Findings on October 30, 2024: a. SCU BLDG B Hall, Back Exit - the exit door was stuck on the threshold and required more than thirty pounds of force to start opening the door. 4. 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 and activation of the fire alarm system. Findings on October 30, 2024: a. SCU BLDG, Kitchen - access to a manual fire pull station was blocked by two carts full of supplies. 5. Based on observations, the building fire safety was not maintained in a safe and operating	C 189		

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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 October 30, 2024: a. AL BLDG, Sunroom - there was a cable not firestopped as it penetrated the fire-resistance-rated ceiling assembly. b. SCU BLDG B Hall, Telephone Room - there were several cable bundles and two cables not firestopped as they penetrated the fire-resistance-rated ceiling assembly. c. SCU BLDG, Med Room - there was two cables not sealed as they penetrated the corridor wall. 6. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on October 30, 2024: a. SCU BLDG D Hall, Storage near Office- there were two 1/4-inch diameter holes through the corridor door around the door handle. 7. Based on observation, the HVAC system was not maintained in a safe and operating condition. This would affect all residents, staff and visitors by allowing unsafe conditions to persist. Findings on October 30, 2024: a. SCU BLDG B Hall, Back Exit Anteroom - the baseboard heater's protective covers were detached and laying on the floor. This exposes some internal components, and some had sharp edges. 8. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on October 30, 2024: a. SCU BLDG B Hall, Spa Housekeeping - there was an electrical panel with an open slot. This allows access to energized components that are	C 189		

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C 189	Continued From page 7 not guarded against accidental contact. b. SCU BLDG B Hall, Back Exit Mechanical Room - there was a junction box with no cover plate. 9. Based on Observation, and interview with Maintenance Director, the facility plumbing system was not maintained in a safe and operating condition. Findings on October 30, 2024: a. SCU BLDG B Hall, Spa Restroom - the sink's cold-water faucet could not be operated. b. SCU BLDG D Hall, Restroom near Electrical Room- the sink's cold-water faucet could not be operated. 10. Based on Observation, the corridor doors were not maintained in a safe and operating condition. Doors were blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on October 30, 2024: a. AL BLDG, Business Office - a door wedge was holding the corridor door open. Facility Staff corrected this deficiency before the Construction Surveyor left the site. b. AL BLDG, Copy Room - a wooden stool was holding the corridor door open. c. AL BLDG 700 Hall, Bedroom 701 - a chair was holding the corridor door open. d. AL BLDG 700 Hall, Bedroom 705 - a door wedge was holding the corridor door open. Facility Staff corrected this deficiency before the Construction Surveyor left the site. e. SCU BLDG A Hall, TV Room - a large chair was holding the corridor door open. f. SCU BLDG C Hall, Game Room - a large	C 189		

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C 189	Continued From page 8 chair was holding the corridor door open. 11. 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 or compartment of origin. Findings on October 30, 2024: a. AL BLDG, Dining Room - the fire sprinkler was missing its escutcheon plate exposing an opening through the fire-resistance-rated ceiling. b. AL BLDG, Kitche Dish Room - the fire sprinkler escutcheon plate did not cover the complete opening through the fire-resistance-rated ceiling. c. SCU BLDG, Living Room/Lobby - two fire sprinkler escutcheon plates had dropped, exposing openings through the fire-resistance-rated ceiling. d. SCU BLDG A Hall, Public Restroom- a fire sprinkler escutcheon plate had dropped, exposing an opening through the fire-resistance-rated ceiling. e. SCU BLDG C Hall, Mechanical Room near Back Exit- the fire sprinkler escutcheon plate did not cover the complete opening through the fire-resistance-rated ceiling.	C 189		
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:	C 199		

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C 199	Continued From page 9 (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 and testing with a thin plastic sheet, the facility did not provide working exhaust ventilation in required spaces. Findings on October 30, 2024: a. AL BLDG, Employee Restroom near Kitchen - the exhaust ventilation system was not functioning. b. AL BLDG, Public Restroom near Kitchen - the exhaust ventilation system was not functioning. c. SCU BLDG A Hall, Bathrooms & Restrooms - there was a pattern of exhaust fans on this Hall not working. d. SCU BLDG B Hall, Bathrooms & Restrooms - there was a pattern of exhaust fans on this Hall not working. e. SCU BLDG C Hall, Bathrooms & Restrooms - there was a pattern of exhaust fans on this Hall not working.	C 199		
C 201	Newly Licensed Facilities-Call System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (i) In newly licensed facilities without live-in staff, an electrically operated call system shall be provided connecting each resident bedroom and bathroom to a staff station. The resident call system activator shall be such that they can be	C 201		

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C 201	Continued From page 10 activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed. (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 interview with Maintenance Director, the electrically operated call system does not provide all the required components of a call system. Findings on October 30, 2024: a. SCU BLDG, Entire Building - per the Maintenance Director, the call system was replaced with a new call system in 2023. The call system devices in the bathrooms and restrooms do not function.	C 201		