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	HAL058011	A. BUILDING: **01** B. WING _____	**01/16/2025**

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WILLIAMSTON HOUSE	**160 SANTREE DRIVE** **WILLIAMSTON, NC 27892**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on January 16, 2025. Records indicate this facility was first licensed on or about January 30, 2001 for Sixty (60) residents. Based on this information, we are requiring the facility to meet the 1996 Rules for the Licensing of Adult Care Homes, applicable portions of the 2005 Regulations for Adult Care Homes, and the 1996 Edition of the North Carolina State Building Code-Section 409 Institutional Occupancy. Deficiencies were cited that require a Plan of Correction.	C 000		
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		

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C 154	Continued From page 1 device on the door that activates when the door is opened when there is at least one resident who is disoriented or a wanderer. Findings on January 16, 2025: a. The exit doors were not equipped with alarms that activated when the doors were opened. Interview with staff revealed that there were wanderers in the facility.	C 154		
C 155	Floors-Non-skid, in Good Repair SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (i) The requirements for floors are: (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable; (2) Scatter or throw rugs shall not be used; and (3) All floors shall be kept in good repair. This Rule is not met as evidenced by: 1. Observations revealed that the facility had scatter or throw rugs in use. This could affect residents is they slipped or tripped over the edges of the rugs. Findings on January 16, 2025: a. Lobby - there was a throw rug in place in the sitting area. The rug was removed at the time of survey.	C 155		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are:	C 160		

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C 160	Continued From page 2 (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 January 16, 2025: a. 300 Hall Porch - the ceiling finish is splitting at the joints.	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. Observations revealed that the furniture and furnishings were not kept clean and in good repair. Findings on January 16, 2025: a. Room 211 - one of the drawers was missing in the right hand wardrobe unit. b. Staff Bathroom - the toilet dispenser is broken. 2. Observations revealed that the ceilings were	C 164		

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C 164	Continued From page 3 not kept clean and in good repair. Findings on January 16, 2025: a. Kitchen Pantry - the ceiling was cracked and splitting along the exterior wall. b. Room 401 - the ceiling over the shower has water damage and is spotted with a black microbial growth. c. Activity Room - the ceiling around the supply vent is stained and the popcorn finish is peeling off. The ceiling between the vent and the exterior wall is stained from an old roof leak.	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 facilities. This Rule is not met as evidenced by: 1. Based on observation the facility is not maintained free from hazards. If the code required clearance of 36" in front of electrical breaker panels is not maintained it could delay timely operation of the breakers in an emergency situation. Findings on January 16, 2025: a. Outside Electrical Room - dumpster carts, mattresses and furniture was stored in front of the electrical panels.	C 166		

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C 166	Continued From page 4 2. Based on observation the facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on January 16, 2025: a. Med Room - there were fifteen oxygen bottles stored in shallow plastic beverage crates without any means of restraint. b. Med Room - there were eight oxygen bottles stored in a shallow plastic crate without any means of restraint to prevent them from tipping or falling over.	C 166		
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 did not properly maintain fire rehearsal logs by not including a short description of what the rehearsal involved.	C 185		

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C 185	Continued From page 5 Findings on January 16, 2025: a. There was not a short description of what the rehearsal involved included in the fire rehearsal logs.	C 185		
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 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 January 16, 2025: a. Exit by Room 210 - the exit sign did not illuminate on test. 2. 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 holes or gaps through the face of the door. Findings on January 16, 2025:	C 189		

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C 189	Continued From page 6 a. Women's Guest Toilet - there is a sliver of a hole at the side of the door hardware. b. Clean Linen - there are two 1/4" diameter holes above and below the door hardware and there is a gap between the door and the door hardware. 3. 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 January 16, 2025: a. Dining Room - the escutcheon ring on the center sprinkler head has dropped leaving a gap in the fire resistant rated ceiling. This was corrected at the time of survey. b. Activity - three of the escutcheon rings on the sprinkler heads have dropped leaving a gap in the fire resistant rated ceiling. These were corrected at the time of survey. c. There is an unsealed cable penetration at the WiFi box outside of the Nurses Station. 4. 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 January 16, 2025: a. Door between Kitchen and Dining - the door frame is out of alignment and the door does not close and latch. b. Laundry - the door between Laundry and Soiled Linen was equipped with an automatic	C 189		

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C 189	Continued From page 7 closer. When the door was released, it did not automatically close and latch. This was corrected at the time of survey. c. Med Room - the door hinge is loose and the door hits the frame and does not close and latch. 5. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Screamer boxes at emergency switches that do not alarm may allow for elopement by not alerting staff that the box has been opened and the switch may have been tampered with. Findings on January 16, 2025: a. Exit by Room 405 - the screamer box did not alarm when lifted. b. Activity Room - the screamer box did not alarm when lifted. 6. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition. Loose toilet seats can affect residents if they shift causing a slip or fall. Findings on January 16, 2025: a. Room 401 Bath - the toilet seat was not secure. 7. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be affected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin. Findings on January 16, 2025: a. Laundry - the door between Laundry and	C 189		

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C 189	Continued From page 8 Soiled Linen was propped open with a five gallon bucket of detergent. b. Dining - the magnet on the right hand door was broken and the door was propped open with a kickdown installed at the base of the door. 8. 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, rooms open to the corridor must not have gaps between pairs of doors. Findings on January 16, 2025: a. Dining - there is a half inch gap between the dining room doors when closed.	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 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, it was revealed that the hot water temperature at all fixtures used by residents was not maintained between 100 degrees F and 116 degrees F.	C 195		

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C 195	Continued From page 9 Findings on January 16, 2025: a. Room 401 Bath - the water temperature at the sink was 120 degrees F.	C 195		
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. 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 January 16, 2025: a. Laundry - the exhaust fan is not working.	C 199		