

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL043029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/08/2025
NAME OF PROVIDER OR SUPPLIER ABSOLUTE CARE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 431 JUNNY ROAD ANGIER, NC 27501		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report of Biennial Construction Survey by Tod Hancock conducted on April 8, 2025. Records indicate that this facility was licensed on March 10, 1997. The facility is currently licensed as a Home for the Aged serving 12 residents. Therefore, this facility must meet the 1996 North Carolina State Building Code Section 419.5, and the 1991 and applicable portions of the 2005 Rules for the Licensing of Adult Care Homes. Deficiencies were cited and 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. Based on an interview with the Executive Director and Maintenance Director, the facility failed to maintain in the facility, current (completed within the last twelve months) sanitation and fire and building safety inspection reports available for review. Findings on April 8, 2025: a. A copy of the current Fire Official's Annual Inspection report was not available for review. c. A copy of the current fire alarm system inspection report was not available for review. d. A copy of the current fire sprinkler system inspection report was not available for review. e. A copy of the current health department	C 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 111	Continued From page 1 inspection was not available for review.	C 111		
C 132	Bathrooms-Must Provide Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that each shower and tub had private partitions or curtains. Findings on April 8, 2025: a. Group Tub and Shower Room/ Right Hall- The shower does not have a privacy curtain.	C 132		
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, hallways, 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 2 Findings on April 8, 2025: a. Right Hall- There were chairs obstructing the corridor and blocking the egress door.	C 150		
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 the facility did not have a record of fire rehearsals being conducted quarterly on each shift. Findings on April 8, 2025: a. There were no records available to indicate that Fire Drills had been conducted.	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.	C 189		

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C 189	Continued From page 3 (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 failed to maintain the fire system's safety components in a safe and operating condition. This could affect all occupants who rely on timely notification of emergencies. Findings on April 8, 2025: a. The Fire Alarm Control Panel (FACP) was signaling trouble with the communication relay. 2. Based on observation, the building was not maintained in a safe operating condition, because the portable fire extinguishers lacked the routine inspections documentation required to ensure proper performance. Failure to maintain fire safety equipment could affect occupants of the facility if the equipment does not function to suppress a fire. Findings on April 8, 2025: a. There was no documentation of the required monthly inspection of all the fire extinguishers.	C 189		