STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL078083	A. BUILDING: **01** B. WING _____	**03/19/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RED SPRINGS ASSISTED LIVING	**1301 E. FOURTH AVENUE** **RED SPRINGS, NC 28377**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Suzanna Fay conducted on March 19, 2025. This facility was licensed on October 8, 1996 for 81 beds. Therefore, this facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1996 Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 148	Corridors-Handrails SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load; This Rule is not met as evidenced by: 1. Observations revealed that the handrails were not maintained and may not be capable of supporting a 250 pound concentrated load. Findings on March 19, 2025: a. The handrail between Rooms 16 and 17 is loose.	C 148	Handrail has been repaired	4/9/2025
C 166	Housekeeping-Maintained Free of Hazards	C 166		

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C 166	Continued From page 1 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 March 19, 2025: a. D Hall Electrical Closet - chairs were stacked in front of the electrical panels preventing the door from opening fully. The chairs were moved at the time of survey.	C 166	Chairs have been moved	3/19/2025
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	C 185		

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C 185	Continued From page 2 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 fire rehearsal logs did not include all of the required components. Findings on March 19, 2025: a. The fire rehearsal logs did not include a short description of what the rehearsal involved.	C 185	Maintenance Supervisor re-trained Administrator/designees on requirements of fire rehearsal logs.	4/3/2025
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's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition due to sprinkler heads being obstructed could affect occupants in the fire compartment if the sprinkler head could not suppress a fire. Findings on March 19, 2025: a. Staff Lounge - there is an accumulation of dust on the sprinkler head and the head is heavily	C 189		

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C 189	Continued From page 3 corroded. The head was cleaned at the time of survey. b. B Hall Community Bath - the sprinkler head is heavily corroded. There was a pattern of corroded heads in the Community Bathrooms. c. Kitchen - the sprinkler heads are heavily corroded and have excessive amounts of dust and grease. 2. 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 March 19, 2025: a. B Hall Community Bath - the toilet is not secure to the floor. 3. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection. Findings on March 19, 2025: a. Room 15 Bath - the tester indicated that the GFCI outlet is "open ground." b. The exterior outlet by the front entrance did not trip when tested. 4. 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 March 19, 2025: a. Exterior Mechanical Room - there is one	C 189	Sprinkler head has been cleaned and free from dust and grease Sprinkler heads will be replaced by sprinkler company Toilet have been secured to the floor GFCI receptacle has been repaired	3/19/2025 5/30/2025 4/9/2025 4/9/2025

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C 189	Continued From page 4 unsealed cable penetration over the small electrical panel and there is an unsealed cable bundle penetrating the ceiling over the middle electrical panel. b. The sprinkler head is not aligned in the opening outside of Room 6. c. The escutcheon ring on the sprinkler head outside of Room 32 near the smoke barrier wall has dropped leaving a gap in the fire resistant rated ceiling. d. D Hall Living Room - the sprinkler head by the window is missing its escutcheon ring. 5. Based on observation fire safety equipment has not been inspected to assure it has been maintained in a safe and operable condition. Occupants of the facility could be affected if fire safety equipment in the smoke compartment did not operate when needed to provide fire protection. Findings on March 19, 2025: a. Kitchen hood suppression systems are to be inspected every six months. The kitchen hood suppression system was last inspected in May of 2024. 6. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be affected if the equipment failed to alert the occupants in case of a fire. Findings on March 19, 2025: a. Room 47 - the smoke detector is chirping indicating a weak battery. b. Room 48 - the smoke detector is chirping indicating a weak battery.	C 189	Fire barrier sealant was put around cables Adjusted sprinkler head Escutcheon plates have been repaired Hood supperssion systems is scheduled for 4/21/2025 Replaced batteries	4/9/2025 4/9/2025 4/9/2025 4/21/2025 4/9/2025

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C 189	Continued From page 5 7. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment did not function to suppress a fire. Findings on March 19, 2025: a. Deficiencies were noted in the Fire Sprinkler System inspection on July 29, 2024. Interview with staff revealed that they had received a quote for the repairs but the repairs had not been conducted at this time.	C 189	Deficiencies will be done by sprinkler company	5/30/2025
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 facility if heat, odors, fumes or possible air borne	C 199		

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C 199	Continued From page 6 contaminates were not exhausted from the building. Findings on March 19, 2025: a. A Hall Laundry - there does not appear to be an exhaust fan in the laundry room. b. D Hall Laundry - there does not appear to be an exhaust fan in the laundry room. 2. 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 March 19, 2025: a. Trash Room - the exhaust fan is not working.	C 199	Exhaust fans were ordered and will be installed Exhaust fan haas been repaired	5/30/2025 4/9/2025