

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL059027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/05/2025
NAME OF PROVIDER OR SUPPLIER ROSE HILL RETIREMENT COMMUNITY		STREET ADDRESS, CITY, STATE, ZIP CODE 120 FLEMING AVENUE MARION, NC 28752		
(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 a Biennial Follow Up Construction Survey by Suzanna Fay conducted on June 5, 2025. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{C 000}		
{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 there is a failure to maintain the corridors free of all equipment and other obstructions. Corridors must maintain six feet clear for egress. Means of egress or exit paths that are obstructed or blocked could delay or hinder emergency evacuation of the occupants from the facility. Findings on June 5, 2025 b. Basement - there were wheelchairs and cleaning equipment partially blocking the exterior exit door.	{C 150}		
{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	{C 155}		

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

TITLE

(X6) DATE

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{C 155}	Continued From page 1 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. Loose rugs can cause injury from a slip or fall. Findings on June 5, 2025: a. First Floor Living Room - there is a thin throw rug on the floor. A rubber mat was placed under the rug to prevent movement, but the edges are still loose creating a trip hazard.	{C 155}		
{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 there is a failure to maintain the building's fire safety systems in a safe condition. Use of materials that are not fire resistant rated could allow fire and smoke to spread beyond the area of origin. Findings on June 6, 2025: a. First Floor Telephone Room - a yellow foam product was used to seal the gap between the	{C 189}		

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{C 189}	Continued From page 2 wall and ceiling. The foam was removed but replaced with another unacceptable foam product. 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 or walls could allow fire and smoke to spread beyond the area of origin. Findings on June 6, 2025: d. Basement Laundry - there is one open conduit sleeve not sealed. 4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on June 6, 2025: c. East Stair - the emergency light between the second and third floor did not illuminate on test. 5. 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 June 5, 2025: a. East Stair - the exit sign at the stair door did not illuminate on test. 11. 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	{C 189}		

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{C 189}	Continued From page 3 doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on June 5, 2025: a. Second Floor - the corridor door to the East Stair is rubbing on the frame again and did not automatically close and latch. 12. 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 gaps or holes within the face of the door. Findings on June 5, 2025: a. Second Floor Nurse Station Bathroom - there are two 1/4" diameter holes through the face of the door above and below the door hardware. 13. Observations revealed that the plumbing equipment was not maintained in a safe and operating manner. Loose seats could cause injury from a slip or fall. Findings on June 5, 2025: a. Room 322 Bath - the toilet seat is loose. The seat was replaced but has become loose again.	{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	{C 199}		

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{C 199}	Continued From page 4 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 June 5, 2025: a. First Floor North Hall Housekeeping (Drain Room) - the exhaust fan and the light were not working. There was a miscommunication as to what this room was called so this item was not corrected.	{C 199}		