

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL064029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/18/2025
NAME OF PROVIDER OR SUPPLIER SOMERSET COURT OF ROCKY MOUNT		STREET ADDRESS, CITY, STATE, ZIP CODE 918 WESTWOOD DRIVE ROCKY MOUNT, NC 27802		
(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 18, 2025. There are deficiencies from the Biennial Construction Survey that remain to be corrected and new deficiencies have been added.	{C 000}		
{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 walls and floors were not kept clean and in good repair. Findings on June 18, 2025: d. Room 105 - the carpet is stained from the doorway to the window wall. The carpet was cleaned but there are dark stains remaining around the perimeter of the room. f. Room 206 - the carpet is stained from the doorway to the window wall. New Deficiency: i. 100 Hall - a leak above the ceiling outside of the Living Room has left yellow water stains on the ceiling around the smoke detector and the	{C 164}		

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

TITLE

(X6) DATE

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{C 164}	Continued From page 1 light fixtures. The ceiling tape is peeling away from the ceiling.	{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 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 June 18, 2025: a. Room 129 Closet - there are six oxygen bottles in a cloth bag on the closet floor.	{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	{C 189}		

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{C 189}	Continued From page 2 facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 2. Observations revealed that the plumbing equipment was not maintained in operating condition. Findings on June 18, 2025: a. Beauty Salon - the right sink is out of order due to leaks. 3. 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 February 12, 2025: a. Kitchen - the in-house monthly inspections are now being conducted and recorded for the hood suppression system but the service tag is dated as October 2024 for the last six month inspection. 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 June 18, 2025: c. There is a 1 1/2" diameter hole in the ceiling outside of Room 221 due to a sprinkler leak. There is a 24" diameter yellow water stain around the hole and the finish is flaking off.	{C 189}		

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{C 189}	Continued From page 3 New Deficiency: d. A six inch diameter hole was punched into the ceiling outside of Room 117 to drain water from a leak above the ceiling. 5. Observations revealed that the electrical equipment was not maintained in operating condition. Findings on June 18, 2025: a. 100 Hall Living Room - the lights are out and some are missing their components due to damage from the sprinkler pipe bursting in January. b. 100 Hall - two of the corridor lights outside of the Living Room are out and missing their components as they were damaged during the freeze event. 6. 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 during a fire. Findings on June 18, 2025: New Deficiency: d. 100 Hall - the smoke detector has been removed outside of the Living Room due to leaks. 10. Review of records revealed that 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 June 18, 2025:	{C 189}		

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{C 189}	Continued From page 4 a. The June 6, 2024 Sprinkler Inspection Report revealed several functional failures including the fire department connection, both of the city connection control valves, painted and loaded heads, head inspections, the quick opening device, all three tamper switches and the water motor gong. Evidence was not able to be provided that these deficiencies had been corrected. New Deficiencies: 11. Based on observation, 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 June 18, 2025: a. The Fire Alarm Control Panel is indicating trouble as well as a supervisory problem. 12. 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 during a fire. Findings on June 18, 2025: a. The sprinkler system is currently down due to leaks on the system. The facility is operating on a fire watch.	{C 189}		
{C 195}	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	{C 195}		

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{C 195}	Continued From page 5 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. Observations and testing revealed that the hot water temperature at all fixtures used by residents was not maintained between 100 degrees F and 116 degrees F. Findings on June 18, 2025: a. Beauty Salon - the water temperature taken at the left sink was still 120 degrees F.	{C 195}		