

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/21/2015
--	--	---	---

NAME OF PROVIDER OR SUPPLIER CARMEL HILLS	STREET ADDRESS, CITY, STATE, ZIP CODE 2801 CARMEL ROAD CHARLOTTE, NC 28226
---	--

(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	<p>Initial Comments</p> <p>This is a Report of a Biennial Construction Survey conducted by Greg Cates and Billy Bryant on January 21, 2015.</p> <p>Based on our records, this facility was first licensed or submitted on or about June 9, 1983 as a Home for the Aged for Thirty-Eight (38) Beds. Based on the above information, we are requiring the facility to conform to the 1977 Minimum Standards and Regulations for Homes for the Aged and Infirm; the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and the 1978 Edition of the North Carolina Building Code, Section 409- Institutional Occupancy.</p>	C 000		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by: 1- Based on observations, the facility failed to ensure that the fire safety, electrical, mechanical, and plumbing systems are maintained safe and operating. Findings include:</p> <p>a- Several of the emergency lights do not illuminate on battery power. Locations include but</p>	C 189		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/21/2015
--	--	---	---

NAME OF PROVIDER OR SUPPLIER CARMEL HILLS	STREET ADDRESS, CITY, STATE, ZIP CODE 2801 CARMEL ROAD CHARLOTTE, NC 28226
---	--

(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 189	<p>Continued From page 1</p> <p>are not limited to:</p> <ul style="list-style-type: none"> 1- Small Dining Room 2- Living Room 3- Large dining Room (One Bulb burnt out) 4- Corridor outside the Salon (One bulb burnt out) <p>b- The GFCI receptacle beside the bar sink in the large Dining Room does not trip when tested and the tester displays an open ground.</p> <p>2- Based on observations, the facility failed to ensure that the one-hour rating of the ceiling was maintained.</p> <p>Findings include:</p> <p>a- In the Shop located in the basement, there are several unprotected penetrations by conduits in the one-hour rated ceiling above the HVAC unit.</p> <p>b- In the Shop located in the basement, there are several unprotected penetrations by piping in the one-hour rated ceiling above the water heater.</p> <p>3- Based on observations, the facility failed to ensure that the building is safe by not maintaining the fire resistance of building components.</p> <p>Findings include:</p> <p>a- The corridor door to Room 123 does not close completely and latch due to the carpet transition strip stopping the door before it will latch.</p> <p>b- In the Small Dining Room, there is a table positioned so that the corridor door cannot be closed. (Note: This deficiency was corrected at the time of the survey)</p>	C 189		