

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060129	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/05/2015
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NAME OF PROVIDER OR SUPPLIER RADBOURNE MANOR III	STREET ADDRESS, CITY, STATE, ZIP CODE 2920 CINDY LANE CHARLOTTE, NC 28269
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(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>Report of Complaint Survey by Dennis Harrell on 8-5-2015.</p> <p>The Complaint alleged that work had recently been done on the corridor doors making the rooms less accessible.</p> <p>Records indicate that plans were submitted on 11-17-1997, for this facility which was built under the 1978 NC State Building Code - Institutional Occupancy. The facility is currently licensed for 12 residents. Based on this information we are requiring the facility to meet the 1991 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1978 North Carolina State Building Code- Institutional Occupancy.</p> <p>The Complaint was substantiated.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of</p>	C 101		

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

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C 101	<p>Continued From page 1</p> <p>Health Service Regulation, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost;</p> <p>This Rule is not met as evidenced by: Based on observation, the facility failed to comply with Sections of the 1978 NC State Building Code that it was built under as relates to access to an exit pasageway. Failure to maintain a Code compliant exit access passageway could delay an evacuation in an emergency. Findings include:</p> <ol style="list-style-type: none"> 1. The doors to the corridor from resident bedrooms, living room, dining room, kitchen and other spaces off the corridor had been recently replaced with 1 3/8 inch thick hollow doors. The 1978 NCSBC required all doors to a 1 hour fire protected corridor to be 1 3/4 inches thick or 20 minute fire rated doors or equivalent doors. 2. The width of the doors to resident bedrooms and other spaces the residents must enter such as the living room, dining room and bathrooms had been reduced from 42 inches to 36 inches. Section 1104.1 of the 1978 NCSBC required doorways to areas housing residents and to resident occupied spaces to be not less than 42 inches wide. <p>NOTE: The corresponding Adult Care Licensure Rules in part C. 3. e. (8) stated that doors in facilities licensed for 29 or less must be 42 inches wide.</p>	C 101		