

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL078095	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/29/2015
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NAME OF PROVIDER OR SUPPLIER HOPE SPRINGS	STREET ADDRESS, CITY, STATE, ZIP CODE 104 HOPE LANE RED SPRINGS, NC 28377
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C 000	<p>Initial Comments</p> <p>This is a Report of a Biennial Construction Survey conducted by Greg Cates and Chris Sluder on September 29, 2015.</p> <p>Based on information gathered from our files, the Facility was first licensed on February 1, 1973 with an addition approved on February 20, 1990. The facility is licensed for a total of Sixty-Three (63) residents. Based on this information, we are requiring the original facility to meet the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the 1967 North Carolina State Building Code- Institutional Occupancy; the addition is being required to meet the 1987 Minimum Standards and Regulations for Homes for the Aged and Disabled and the 1978 North Carolina State Building Code, Section 510- Institutional Occupancy; and the entire facility is required to meet the applicable portions of the 2005 Rules for Adult care Home of Seven or More Beds.</p>	C 000		
C 111	<p>Must Have Current San. & Fire Safety Reports</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview, all of the sanitation and fire and building safety inspection reports were not available for review.</p> <p>Findings from 9/29/15:</p>	C 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 111	Continued From page 1 1. Facility staff indicated that all of the kitchen equipment had been replaced with the exception of the Type I range hood and the Range Hood Suppression system was scheduled to get a final inspection and approval on 9/29/2015. 2. Facility staff indicated that they would request an Annual Fire Inspection to be completed. 3. Facility staff indicated that when the Range Hood Suppression was approved and the Kitchen was fully functioning they would call Health Department to obtain approval to begin operating the kitchen. 4. Facility staff indicated they would obtain a Sanitation Inspection for the Building at the same time as the Kitchen.	C 111		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to provide grab bars at all the tubs, showers, and toilets. This could result in a person falling due to inadequate protection. Findings include: a- There is no grab bar at the shower in Room 101 b- There is no grab bar at the tub in the Shared	C 133		

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C 133	Continued From page 2 bath between Rooms 207 and 209.	C 133		
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- Based on observations, the facility has failed to maintain the facility in good repair. Findings include: a- There is a pattern exhibited where the door hardware is missing from doors, including but not limited to: 1- Sitting Room across from Room 201 2- Storage beside Room 207 3- Closet door in Room 213 b- In the shared bathroom between Rooms 207 and 209, there are the following issues, to include but not limited to: 1- The caulking around the tub is in disrepair and needs replacing. 2- There are rust stains and dried grout on the wall beside and under the sink c- In the Spa, there are the following issues, to include but not limited to: 1- There is dried grout and caulk	C 164		

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C 164	Continued From page 3 on the wall beside the sink and toilet. 2- The ceramic tile beside the toilet is chipped. 3- There is dirty residue on the ceramic tile floor where the pedestal sink was removed. d- The handrail outside Room 211 has been repaired with a plumbing strap, is loose and has rough/ sharp edges. e- The exhaust duct for the large clothes dryer in the Laundry is disconnected at one of the joints.	C 164		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on observations, the facility has failed to provide towel racks for the number of residents in a room. Findings include: a- The single towel bar in the shared bathroom between Rooms 207 and 209 is missing the bar and there are at least two residents who will share this bathroom.	C 175		

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C 189 C 189	<p>Continued From page 4</p> <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:</p> <p>1- Based on observation, the design and maintenance of the HVAC systems in the original building is not in a safe condition. This can effect the residents in this portion of the building if the HVAC systems do not shut down during a smoke event but instead force smoke into the exit corridor.</p> <p>Findings on 9/29/2015: The original building has a capacity of 15 residents and was designed with HVAC Supply Air Ducts to each room and centrally located Return Air Ducts. When a smoke detector in the corridor activated the fire alarm system, the circulating fans in the two HVAC systems coninued to move air.</p> <p>2. Based on observations, exit lighting and signage are not maintained safe and operating. These deficiencies may affect residents, staff, or visitors who live, work, or visit the facility if the exits are not clearly identified and illuminated.</p> <p>Findings include:</p> <p>a- The EXIT sign located near the RCC office is</p>	C 189 C 189		

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C 189	<p>Continued From page 5</p> <p>not equipped with battery back-up.</p> <p>b- The emergency lights located in the following areas are not equipped with battery back-up. Locations to include but not limited to:</p> <ul style="list-style-type: none"> 1- Corridor outside the Dining Room 2- Nurse ' s Station office <p>3- Based on observations, the facility failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p> <p>Findings on include:</p> <ul style="list-style-type: none"> a- The corridor door to Room 201 is not installed b- There are unsealed penetrations in the fire-rated ceiling assembly in the outside Mechanical Room beside the Laundry c- There are unsealed penetrations and ceiling damage in the Data Room. d- There is a large gap around the heat detector in the Shower/ Tub Room in the 100 Hall. e- In the attic of the front building, there is damage to the one-hour tunnel assembly. <p>Locations to include but not limited to:</p> <ul style="list-style-type: none"> 1- Above the electrical panel between Rooms 105 and 107 2- Between Rooms 113 and 115 <p>4- Based on observations, the facility has failed to maintain the building electrical system safe and operating.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- The quad receptacle in Room 209 has a missing cover plate. 	C 189		

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C 189	<p>Continued From page 6</p> <p>b- The duplex receptacles located in the following areas are not GFCI protected. Locations to include but not limited to:</p> <ul style="list-style-type: none"> 1- Beauty Shop 2- Men ' s bathroom near the Nurse's Station 3- Women ' s bathroom near the Nurse ' s Station 4- Shared bathroom between Rooms 107 and 109 <p>c- There is a duplex receptacle in the Data Closet that is missing a cover.</p> <p>5- Based on observations, the facility has not maintained the plumbing system safe and operating.</p> <p>Findings include:</p> <p>a- There are no back-flow preventers in the following locations, to include but not limited to:</p> <ul style="list-style-type: none"> 1- Sink in the Janitor's Closet 2- Patio faucets <p>b- The control valve for the tub in the Shared bathroom of Room 207/209 is missing.</p> <p>c- The plumbing access cover is missing in Room 210</p> <p>d- The pipe for the waste vent line under one of the sinks in the kitchen is plugged with a rag.</p> <p>e- The trap in floor drain in the Data Closet was dry.</p> <p>6- Based on observations, the facility has not maintained the HVAC duct smoke detection system safe and operating. This could result in the return air not being sampled correctly for the detection of smoke.</p> <p>Findings include:</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>a- There is no access door for inspecting or cleaning of the duct smoke detectors in the outside Mechanical Room.</p> <p>7- Based on observations, the facility has failed to maintain the fire doors to close and resist passage of fire and smoke. This affects all occupants of the building if fire and smoke is not contained in the event of a fire emergency.</p> <p>Findings include:</p> <p>a- The fire doors from the addition into the original building have a padlock latch on them that is preventing them from closing completely and could be used to lock the doors closed.</p>	C 189		
C 199	<p>Exhaust Ventilation</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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:</p> <p>(1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area.</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 and testing, the facility</p>	C 199		

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C 199	<p>Continued From page 8</p> <p>has failed to provide mechanical exhaust systems where required. This may affect all persons in the building as it prevents the exhausting of odors and possible bacteria or germs that may cause illness.</p> <p>Findings include:</p> <p>a- There is no exhaust (or window) in the shared bathroom between Rooms 207 and 209.</p> <p>b- In the attic, there are multiple exhaust ducts that have loose connections and are exhausting into the attic.</p>	C 199		