

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL076005</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/28/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CARILLON ASSISTED LIVING OF ASHEBORO</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2925 ZOO PARKWAY ASHEBORO, NC 27204</b>
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C 000	<p>Initial Comments</p> <p>Report of a Biennial Construction Survey by Ed Miller on October 28, 2015.</p> <p>Records indicate this facility was first licensed on July 17, 1996. The facility is currently Licensed for Ninety-six (96) Resident Beds, including Twenty-four (24) Special Care Beds. Based on this information, the facility is required to meet the 1996 Minimum Standards and Regulations for Adult Care Homes, applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds, and the 1996 North Carolina State Building Code Section 409 Group I -Institutional Occupancy.</p> <p>Physical plant deficiencies were noted which require a plan of correction.</p>	C 000		
C 133	<p>Bathrooms-Hand Grips</p> <p>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;</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that commodes, tubs and showers are equipped with stable hand grips. This deficiency affects all residents who use these unstable fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on October 28, 2015: a. There was a loose hand grip (grab bar) at the</p>	C 133		

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

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C 133	Continued From page 1 commode in the D Hall Spa.	C 133		
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 failed to maintain the HVAC grilles and their associated dampers clean and free from hazards. This could affect all residents, staff and visitors if in the event of a fire the dampers do not close completely to contain the fire within the room of origin. Findings on October 28, 2015: a. The HVAC return grille with its radiation damper had an excessive accumulation of dust/lint at the employee entrance. Deficiency corrected before Construction Surveyors departed Site.	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 facilities with the exception of Paragraph (e)	C 189		

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C 189	<p>Continued From page 2</p> <p>which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> <li>1. Based on observation, the Building was not maintained in a safe and operating condition, because some areas are not protected with fire sprinklers. This would affect all residents, staff and visitors, by not providing the protection fire sprinklers provide. Findings on October 28, 2015:               <ol style="list-style-type: none"> <li>a. In the Commercial Laundry Water Heater Room there was no fire sprinkler protection.</li> </ol> </li> <li>2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict smoke. This could affect all residents, staff and visitors by not containing the smoke to the fire compartment of origin. Findings on October 28, 2015:               <ol style="list-style-type: none"> <li>a. The front leaf, of the double-egress cross-corridor doors on A Hall, did not latch when the fire alarm system released the doors.</li> </ol> </li> <li>3. Based on observations, the Building was not maintained in a safe and operating condition, because of breaches through the fire-resistance-rated construction invalidates its integrity. This could affect all residents, staff and visitors if smoke/fire is not contained in Room or compartment of origin. Findings on October 28, 2015:               <ol style="list-style-type: none"> <li>a. There were gaps/holes behind conduit that penetrate through the fire-resistance-rated ceiling assembly in the A Hall Electrical Room,</li> <li>b. There were gaps around 2 unsealed cables that penetrate through the fire-resistance-rated ceiling assembly in the Main Electrical Room,</li> </ol> </li> </ol>	C 189		

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C 189	<p>Continued From page 3</p> <p>c. In the Dining Room there was a penetration through the fire-resistance-rated ceiling assembly by an open ended sleeve.</p> <p>d. The ceiling in the Commercial Laundry Water Heater Room had a two inch diameter hole through the fire-resistance-rated ceiling assembly.</p> <p>4. Based on observation, the Building was not maintained in a safe and operating condition, because the fire sprinkler escutcheon plates were impaired, exposing openings through the fire-resistance-rated construction. This could affect all residents, staff and visitors if smoke/fire is not contained in the Room or compartment of origin Findings on October 28, 2015: a. The fire sprinkler escutcheon plate had dropped down from the ceiling in the Room behind the commercial dryer, b. The fire sprinkler escutcheon plate had dropped down from the ceiling in the Riser Room, c. The fire sprinkler escutcheon plate did not cover the complete hole through the ceiling in the Private Dinning Room, d. The fire sprinkler escutcheon plate was missing in Bedroom A-7, e. The fire sprinkler escutcheon plate was missing in D Hall Quit Room Closet.</p> <p>5. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors did not resist the passage of smoke due to door leafs not fitting into their frames with acceptable gaps under normal operating conditions. This could affect all residents, staff and visitors if the doors did not contain smoke/fire in the room of origin. Findings on October 28, 2015: a. D Hall Housekeeping Closet corridor door did</p>	C 189		

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C 189	Continued From page 4  not fit into its doorframe without exerting more than the normal closing force to get the door to latch, b. Bedroom D-4 corridor door did not fit into its doorframe without exerting more than the normal closing force to get the door to latch.  6. Based on Observation, the Building was not maintained in a safe and operating condition, because some corridor doors were held open by devices that do not release with a push or pull of the door, preventing the doors from being closed and latched rapidly. This could affect all residents, staff and visitors by not containing smoke and fire in the room of origin. Findings on October 28, 2015: a. The corridor door to the Bedroom A-12 had a wedge holding the door open.	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 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.	C 199		

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C 199	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on Observation and testing the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff and visitors by subjecting them to odors.</p> <p>Findings on October 28, 2015:</p> <p>a. The exhaust ventilation was not moving adequate air in Bathroom in Bedroom A-7,</p> <p>b. The exhaust ventilation was not moving adequate air in A Hall Housekeeping,</p> <p>c. The exhaust ventilation was not moving adequate air in Commercial Laundry,</p> <p>d. The exhaust ventilation was not moving adequate air in D Hall Public Toilet,</p> <p>e. The exhaust ventilation was not moving adequate air in D Hall Housekeeping.</p>	C 199		