

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/11/2015
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NAME OF PROVIDER OR SUPPLIER HERITAGE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 2809 OLD CONCORD ROAD SALISBURY, NC 28146
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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 Biennial Construction Survey by Dennis Harrell on 12-11-2015.</p> <p>Records indicate this facility was first licensed on 1-1-1979, for 34 residents. The current owner furnished a document that indicates the facility was operating as Smith's Rest Home in March of 1961, with a capacity of 33. The owner also furnished a copy of a letter dated 4-27-2015, indicating that 5 beds have been relocated, pending CON approval, to another facility. When the relocation is complete, the licensed capacity will be 29 beds. Based on this information, the facility is required to meet the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, the 1967 North Carolina State Building Code Section 409 Institutional Occupancy - Group D, and the applicable portions of the 2005 Rules for Adult Care Homes 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 a review of documents, the most recent fire alarm system inspection report was dated 8-26-2013. Fire alarm systems that are not inspected and approved annually as required could result in the fire alarm system not operating properly in the event of an actual fire.</p>	C 111		

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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	C 133		
C 133	<p>Bathrooms-Hand Grips</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(e) The requirements for bathrooms and toilet rooms are:</p> <p>(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: Based on observation, the hand grip provided at the toilet in the shower room is loosely mounted to the wall. Loosely mounted hand grips could cause a resident to fall.</p>	C 133		
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.</p> <p>(c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by: Based on review of documents, the records of fire drill rehearsals did not include any description of what the rehearsal involved.</p>	C 185		

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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:</p> <ol style="list-style-type: none"> 1. Based on observation, the battery powered emergency light in the corridor near room 124 would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. 2. Based on observation the required one-hour fire rated ceiling was compromised in the med room. Penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. 3. Based on observation, some exterior handrails at steps were loosley mounted. A handrail that is not firmly mounted could cause residents or staff to fall. <p>Findings include:</p> <ol style="list-style-type: none"> a. The handrail was loose at the stairs outside the exit near room 131. b. The handrail was loose at the steps at the front door. 	C 189		

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C 189	Continued From page 3 4. Based on observation, there was a significant depression in the floor of the corridor near the time clock. The depression was approximately 5 inches in diameter and 1.25 inches deep. It presents a trip and fall hazard.	C 189		