

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL076027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 03/22/2016
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NAME OF PROVIDER OR SUPPLIER NORTH POINTE	STREET ADDRESS, CITY, STATE, ZIP CODE 1195 PINEVIEW ROAD RANDLEMAN, NC 27317
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C 000	<p>Initial Comments</p> <p>This report of a Biennial Construction Survey done by Bob Getchell on March 22, 2016.</p> <p>This facility was first licensed as a Home for the Aged serving 67 residents on January 01, 1997. Therefore the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 North Carolina State Building Code Group I-2.</p> <p>Deficiencies were noted which will require a plan of correction.</p>	C 000		
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the resident furnishings in bedrooms and other areas were not maintained in good condition.</p> <p>Findings include:</p> <p>a) Room B45 has furniture with handles loose/missing on the drawers.</p>	C 164		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT</p>	C 166		

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

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C 166	<p>Continued From page 1</p> <p>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building was not maintained free of hazards by obstructing a Dining Room Exit door. This would affect all residents by blocking the exit.</p> <p>Findings include: A kitchen floor mat was stacked outside the Dining Room Exit door preventing the door from being able to be opened in an emergency.</p>	C 166		
C 183	<p>Fire Extinguishers</p> <p>SECTION .0300 - PHYSICAL PLANT</p> <p>10A NCAC 13F .0308 FIRE EXTINGUISHERS</p> <p>(a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof.</p> <p>(b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building fire protection equipment was not maintained to keep the facility safe. This would affect all residents by not having fire protection equipment operable for use in an emergency.</p> <p>Findings include:</p>	C 183		

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C 183	Continued From page 2 The inspection tags on the Ansul Kitchen Range Hood suppression system indicate that routine monthly inspections are not being performed per NFPA 17A.	C 183		
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) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would affect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings include: a) In the attic the kitchen range hood exhaust enclosure has an unprotected penetration by a sprinkler pipe. b) The attic smoke barrier wall between the C Hall corridor and the Dining room has an unprotected penetration by a sprinkler pipe and cable. c) The draft stop wall over room 11 has unprotected penetrations by wire d) In the attic the draft stop wall at the Beauty Shop has an unprotected penetration by sprinkler	C 189		

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C 189	<p>Continued From page 3</p> <p>pipe and wires.</p> <p>e) In the attic the kitchen range hood exhaust enclosure has an unprotected penetration by a sprinkler pipe.</p> <p>f) In the attic the smoke barrier wall at room 40 has an unprotected penetration by a sprinkler pipe and wires</p> <p>g) In the attic the draft stop wall at the Gift Shop / room 52 has an unprotected penetration by a sprinkler pipe</p> <p>h) Throughout the building the sprinkler escutcheons have slid down during the sprinkler pipe replacement project, revealing unprotected openings in the ceiling.</p> <p>i) The kitchen ceiling has unprotected pipe penetrations over the Ansul hood suppression system.</p> <p>j) The escutcheon on the corridor light fixture near room B36 has slid down revealing an unprotected opening in the ceiling. (Secured immediately on-site)</p> <p>These unprotected openings are not in conformance with the requirement to use a through penetration fire stop system that has been tested in accordance with ASTM E-814.</p> <p>2. Based on observation, the building fire protection equipment was not maintained to keep the facility safe. This would affect all residents if the systems failed to detect smoke. Findings include: a) The sample tubes for the HVAC duct mounted smoke detectors were dirty in the HVAC unit #2 and #4.</p> <p>3. Based on observation, the building plumbing equipment was not maintained operable. This could expose residents to a slip and fall hazard.</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>Findings include: Toilets are coming loose from the floor in bathrooms C20, D26 and D28.</p> <p>4. Based on observation, the building plumbing equipment was not maintained in a safe manner.</p> <p>Findings include: a) The spray hose on the community bath at the Gift Shop has no vacuum breaker. b) In the right front yard there are 2 broken 4" sewer line caps.</p> <p>5. Based on observation, the building exit signage and emergency illumination were not maintained in a safe manner. This would affect all residents by not keeping the exits visible in an emergency.</p> <p>Findings include: Exit signs and emergency lights are not working in the following locations: a) Exit sign at room D29 not working on battery backup, b) Exit sign at front entry foyer not working on battery backup c) Emergency Light in Gift Shop is not working on battery backup. d) Exit sign at room B41 not working on battery backup</p> <p>6. Based on observation, the facility components were not maintained operable by having doors that were difficult to close and latch.</p> <p>Findings include: a) C Hall Spa Room door near the kitchen scrubs frame and will not easily close and latch,.</p> <p>7. Based on observation, the building fire</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>protection equipment was not maintained to keep the facility safe. This would affect all residents if the systems failed to suppress a fire..</p> <p>Findings include: a) Items are stored within 18" of sprinkler heads in the Storage Rooms near D24 and B44.</p> <p>8. Based on observation, the building HVAC equipment was not maintained operable. This could expose residents to temperature variations in certain areas inside the building.</p> <p>Findings include: a) In the kitchen one of the ceiling HVAC radiation dampers has activated.</p>	C 189		