

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL099009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/09/2016
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NAME OF PROVIDER OR SUPPLIER PINEBROOK RESIDENTIAL CENTER 1	STREET ADDRESS, CITY, STATE, ZIP CODE 244 HARRISON AVENUE YADKINVILLE, NC 27055
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C 000	<p>Initial Comments</p> <p>Report of Biennial Construction Survey by Dennis Harrell on 5-9-2016.</p> <p>Records indicate this facility was first licensed as a Home for the Aged serving 54 residents on 12-1-1958. A gabled roof and central air conditioning was added to the flat- roof structure on or about 3-30-2001. Therefore the facility is required to meet the 1958 North Carolina State Building Code, the 1996 North Carolina Mechanical Code (1999 Edition), the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes.</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</p> <p>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 Health Service Regulation at no cost;</p> <p>This Rule is not met as evidenced by:</p>	C 101		

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Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE VP	(X6) DATE 7/6/16
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C 101	<p>Continued From page 1</p> <p>Based on observation, the facility does not meet the requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm".</p> <p>Findings:</p> <ol style="list-style-type: none"> 1. There was not a fire partition separating the facility into two fire compartments. This is not in accordance with the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and infirm" Section C311(2) which requires that the corridor has no more than 150' feet between one hour fire partitions and smoke stop doors therein. Contact your local Building Inspector to determine if a permit is required. Construction of the fire rated partition may require project review by the DHSR Construction Section. 2. There was no fire detecting device (a heat or smoke detector connected to the existing fire alarm system) provided in the following spaces; <ol style="list-style-type: none"> a. Blue Bath off corridor, b. Tan Bath off corridor, c. Administrator's office, d. Office adjacent to Administrator's office, e. Foyer to Admin office suite, f. Attic spaces. <p>This is not in accordance with the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm" Section C4a(1) requiring a fire alarm system with complete detection.</p> <p>Based on observation, the facility does not meet the requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm". This would result in an obstructed exit for any resident who it would be required to move them in their bed to evacuate in the event of a fire.</p> 	C 101	<p>We are waiting for the yadkin County building inspector/fire Marshal and or requesting consideration as an equivalency. We request additional time to complete this item until August 30, 2016.</p> <p>We will add the devices listed from 2A through 2F. Due to the extreme heat in the attic and the contractors schedule, at this time of year we are requesting a delay of implementation of adding the heat/smoke detectors until September 2016.</p>	

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C 101	Continued From page 2 3. The corridors were only 6 feet wide. This is not in accordance with the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm" Section C311(2) which requires that the corridor be 8 feet wide in homes with a capacity of 30 or more. 4. The exit doors were less than 44 inches wide. This is not in accordance with the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm" Section C311(8) which requires exit doors to be 44 inches wide in homes with a capacity of 30 or more. 5. The bedroom doors were less than 44 inches wide. This is not in accordance with the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm" Section C3d(4) which requires bedroom doors to be 44 inches wide in homes with a capacity of 30 or more.	C 101	We request an equivalency of the 6 foot hallway as we do not at the present time have any residents that are bed ridden and we will never allow residence that are. We request an equivalency of the 44 inch wide exit doors based on the fact that they are only 2 inches wider than our 42 inch doors. We request an equivalency of the 44 inch wide bedroom doors based on the fact that they are only 2 inches wider than our 42 inch doors.	
C 111	Must Have Current San. & Fire Safety Reports 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. This Rule is not met as evidenced by: Based on a review of documents, the most recent Fire Marshal's inspection report was dated 11-12-2014. Buildings and fire safety systems that are not inspected and approved annually as required could endanger the health and safety of residents and staff.	C 111	Reviewing this with the local fire marshal, he stated that 11-12-2014 was the last inspection. He said do to an employee change in the department, inspections got backed up. We therefore request an equivalency of this building inspection report because it does not exist.	

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C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(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.</p> <p>This Rule is not met as evidenced by: Based on observation, a wall drain had been left unsealed after the removal of a plumbing fixture in the corridor bath beside room 124. Unsealed drains allow noxious, combustible odors and possibly harmful bacteria to enter the facility.</p>	C 166		
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. (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 observation, several heat detectors had been painted. Heat detectors that have been painted may not work properly in a fire and must be replaced. Painted detectors include: a. Dining room (2),</p>	C 189	C189 1 & 2, All heat detectors have been replaced.	

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C 189	<p>Continued From page 4</p> <p>b. Hopper room.</p> <p>2. Based on observation, the heat detector in the clean linen room was not properly mounted to the ceiling. Improperly mounted heat detectors may delay activating in the event of a fire.</p> <p>3. Based on observation, many corridor doors are not closing well and/or latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include;</p> <p>a. Bedroom 102 will not latch, b. Bedroom 108 will not latch, c. Bedroom 110 will not latch, d. Bedroom 104 will not close and latch, e. Bedroom 111 will not close and latch, f. Door to the Blue Bath not fitting well enough to be smoke resisting, g. Door to bedroom 107 propped open.</p> <p>4. Based on observation, a portion of the roof approximately 3 ft. by 3 ft. was severely sagged and probably rotted under the shingles.</p> <p>5. Based on interview with staff, there are at least 2 draft stop walls in the attic thereby making at least 3 attic spaces. Based on observation, there is only one attic access opening. All attic spaces must be protected with heat detectors and access is required to each space.</p> <p>6. Based on observation, there was no key onsite to allow entry into the corridor bath beside room 101. With no key available, we could not enter to survey for hazards in the space.</p>	C 189	<p>The heat detector not properly mounted has been repaired.</p> <p>C 189 3a-f, All corridor doors listed have been adjusted to latch properly. We also checked every door in the building and repaired any door found not to latch.</p> <p>C189 3g, We are creating a written training policy on how to deal with the residents on leaving doors propped open. This should be completed by July, 2016.</p> <p>C189 4, The roof was repaired</p> <p>C189 5, We will add fire rated doors to the spaces. Due to the Extreme heat at this time of year wa are asking for an a delay of implementation to September, 2016</p> <p>A key is available now.</p>	

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C 199	Continued From page 5	C 199		
C 199	Exhaust Ventilation	C 199		
	<p>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.</p> <p>This Rule is not met as evidenced by: Based on observation the facility failed to maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly bacteria. Finding includes: The exhaust fan would not work in the bathroom beside room 120.</p>		<p>The exhaust fan in bathroom beside room 120 has been repaired</p>	