STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: 01 B. WING HAL096031 02/17/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 2201 ROYALE AVENUE **GOLDSBORO ASSISTED LIVING & ALZHEIMEF** GOLDSBORO, NC 27534 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PRÉFIX **PREFIX** DATE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) C 000 Initial Comments C 000 This report is of a Biennial Construction Survey done by Bob Getchell on February 17, 2015. Records indicates this facility was first licensed or submitted on April 15, 1984 as a Home for the Aged (HA). The facility is currently licensed for 56 Beds including a 24 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the 1984 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds, and, the 1978 North Carolina State Building Code(s). Group I - Institutional Unrestrained Occupancy. Deficiencies were noted which will require a plan of correction C 148 Corridors-Handrails C 148 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL **ENVIRONMENT** (g) The requirements for corridors are: (2) Handrails shall be provided on both sides of corridors at 36 inches above the floor and be capable of supporting a 250 pound concentrated load: This Rule is not met as evidenced by: 1. Based on observation, the building handrails were not maintained in a safe manner. This would effect all residents by not supporting them in a fall. Findings on 2-17-15: The handrail is coming loose from the corridor wall outside the right SCU shower room

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE (X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPL A. BUILDING:	E CONSTRUCTION 01	(X3) DATE SURVEY COMPLETED		
		HAL096031	B. WING		02/1	7/2015
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 2201 ROYALE AVENUE GOLDSBORO, NC 27534						
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C 189	Continued From pa	ge 1	C 189			
C 189	Building Equipment	Maintained Safe, Operating	C 189			
	mechanical, and plu care home shall be operating condition (k) This Rule shall facilities with the ex	11 OTHER d all fire safety, electrical, umbing equipment in an adult maintained in a safe and				
	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 effect all residents by not containing smoke and fire in the room or smoke compartment of origin.					
		e wrap insulation on the exhaust duct is not secured in				
		esistance rated corridor n the center attic is damaged.				
	c. The draft wall in tunprotected penetra	he center attic has an ation,				
	d. The hot water roo penetrations	om ceiling has uprotected				
	e. The Kitchen ceiling penetrations at the	ng has unsealed conduit Ansul piping,				

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HAL096031		B. WING		02/17/2015		
NAME OF I	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
GOLDSBORO ASSISTED LIVING & ALZHEIMEF 2201 ROYALE AVENUE GOLDSBORO, NC 27534						
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C 189	Continued From pa	ige 2	C 189			
		esident Care Coordinators tected penetration by phone				
		in the Med Room has a lissing the fusible link, but the se completely.				
	conformance with t through penetration	openings are not in he requirement to use a n fire stop system that has ordance with ASTM E-814.				
	was not maintained	ration, the building exit signage I in a safe manner. This would by not keeping the exits visible				
	Findings on 2-17-19 Exit sign at Activity battery backup,	5: Room exit not working on				
	equipment was not	vation, the building electrical maintained in a safe manner. Il residents by potentially n electrical hazard.				
	Findings on 2-17-1	5:				
	a. The outlet in room	m 122 is broken. NOTE: ced immediately.				
	b. The outlet in SCI	J Dining Room is cracked.				
	c. The GFCI outlet would not trip when	in the 130/128 shared bath tested.				
	d. Room 126 has a electrical outlet,	an expansion adapter on the				

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		HAI 006024		B. WING		02/	47/204 <i>E</i>	
		HAL096031		<u> </u>		02/	17/2015	
NAME OF	PROVIDER OR SUPPLIER				STATE, ZIP CODE			
GOLDSBORO ASSISTED LIVING & ALZHEIMEF GOLDSBORO, NC 27534								
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C 189	Continued From page 3			C 189				
	e. Room 124 has an expansion adapter on the electrical outlet,							
	4. Based on observation, doors were not maintained in a safe manner. This would effect all residents by not preventing the passage of smoke.							
	Findings on 2-17-15:							
	a. The Laundry door was found wedged open,							
	b. The Housekeeping Closet door was found wedged open,							
	c. On the 118 Hall the back leaf of the cross corridor doors is not latching when released.							
	d. The doorknob is coming loose on the room 103 bathroom door.							
	5. Based on observation, the building was not maintained in a safe manner because a toilet is coming loose from the floor. This would effect the residents sharing the toilet by exposing them to leaks from a broken wax seal.							
	Findings on 2-17-15:							
	Room 111 bathroom from the floor. Sec	m has a toilet coming cure.	loose					
	maintained in a saf bottles were improperfect all residents	rvation, the building wa fe manner because ox perly secured. This w by exposing them to h all over and rupture.	ygen ould					
	Findings on 2-19-1 There are oxygen b	5: pottles stored in bever	age					

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C 189	Continued From pa		C 189				
C 199	crates in the Resident Carer Coordinators office. 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. This Rule is not met as evidenced by: 1. Based on observation, the building exhaust ventilation was not maintained in accordance with this Rule. Findings on 2-17-15:		C 199				
	132/134 is not workb. The exhaust fan working.	in the SCU Tub Room is not					
	c. The exhaust fan is not working.	in the SCU left shower room					

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