STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL064010	A. BUILDING: **01** B. WING _____	**03/11/2015**

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SOMERSET COURT OF ROCKY MOUNT	**918 WESTWOOD DRIVE ROCKY MOUNT, NC 27802**

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C 000	Initial Comments This report is of a Biennial Construction Survey done by Bob Getchell and Ed Miller on March 11, 2015. This facility was first licensed or submitted as a HAserving 60 residents on 10/21/1996. Therefore the facility was surveyed for conformance with the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds, and, the 1996 North Carolina State Building Code(s), Institutional Occupancy. Deficiencies were noted which will require a new plan of correction.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS 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, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost; This Rule is not met as evidenced by:	C 101		

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C 101	Continued From page 1 1. Based on observation, the building fire sprinkler equipment was not maintained in a safe manner. This would effect all residents by not extinguishing a fire when the sprinkler system is activated. Findings on 03/11/2015: a. In the sprinkler riser room the accelerator has been disabled which would slow down the time it takes water to reach the most distant sprinkler head. NOTE: A Plan of Protection was obtained from the provider to 1) have a designated person perform a fire watch every 30 minutes, 2) have the sprinkler company come repair the deficiencies first thing in the morning, and 3) maintain the fire watch until the repairs are completed and approved by the local fire marshall. 2. Based on observation, the building fire detection equipment was not maintained in a safe manner. This would effect all residents by not detecting a fire. Findings on 03/11/2015: There are smoke detectors hanging by the wires in the following locations: a) Room 215, b) Room 130. 3. 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. Findings on 03/11/2015: a. In the attic the kitchen rang hood grease duct	C 101		

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C 101	Continued From page 2 fire wrap has been secured by steel bands spaced 30 inches apart. Typical installation guidelines specify maximum 10.5"spacing between bands.	C 101		
C 133	Bathrooms-Hand Grips 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; This Rule is not met as evidenced by: 1. Based on observation, the building safety equipment was not maintained in a safe manner. This would effect all residents by not protecting them from falls. Findings on 03/11/2015: a. The grab bar is loose in the bathroom of room 215	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:	C 166		

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C 166	Continued From page 3 1. Based on observation, the building was not maintained in a safe manner by not properly securing oxygen cylinders. This would effect all residents by exposing them to explosion hazards. Findings on 03/11/2015: There are unsecured oxygen bottles in the following locations: a. There are oxygen bottles being stored in beverage crates in room 123. b. There are oxygen bottles being stored in a cardboard box, and one bottle is loose in room 119, c. There are two unsecured oxygen bottles in room 117.	C 166		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (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. (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. This Rule is not met as evidenced by: 1. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by not being available when needed to put out a fire. Findings on 03/11/2015: a. The tags on the fire extinguishers are not being checked off monthly to record monthly	C 183		

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C 183	Continued From page 4 inspections per NFPA 10.	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 fire protection equipment was not maintained in a safe manner. This would effect all residents by obstructing sprinkler coverage. Findings on 03/11/2015: a. There are items stored within 18 inches of the sprinkler heads in the following locations: 1) Bedroom closets, 2) Storage Rooms. 2. Based on observation, the building HVAC equipment was not maintained in a safe manner. This would effect all residents by exposing them to airborne contaminants. Findings on 03/11/2015: a. The HVAC returns are clogged with dust. 3. Based on observation, the building HVAC equipment was not maintained in an operating manner. This would effect all residents by not providing proper airflow to all areas.	C 189		

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C 189	Continued From page 5 Findings on 03/11/2015: a. There are ceiling radiation dampers activated in the supply and return grilles at the following locations: 1) Dining Room, 2) Corridor outside Dining Room, 3) Soiled Utility/Hopper Room, 4) Beauty Shop, 5) Activity Room 4. Based on observation, the building plumbing equipment was not maintained in a safe manner by allowing cross connects. This would effect all residents by potentially siphoning waste water into the potable water supply Findings on 03/11/2015: a. Room 214 has no vacuum breaker on the spray hose. b. Room 203 has no vacuum breaker on the spray hose. 5. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of corridor doors. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings on 03/11/2015: a. The Dining Room doors have a coordinator that is missing parts so it can not close and latch to resist the passage of smoke b. The door to the Staff Lounge has holes at the handle c. Administrative Office doors held open with wedges, d. Kitchen door held open with wedge	C 189		

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C 189	Continued From page 6 6. 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. Findings on 03/11/2015: a. There is a hole in the wall in the Administrators office. b. The ceiling in the Living Room Storage/HVAC rooms is sealed with an unapproved, unidentified sealant c. The 100 Hall Living Room Storage closet has a sprinkler head that has a gap revealing an opening to the attic d. The ceiling in the I.T. Room is sealed with an unapproved, unidentified sealant, e. There are 3 unsealed conduits in the attic near the 200 Hall smoke barrier wall. f. There is an unsealed 3/4" conduit in the 100 Hall smoke barrier wall in the attic. 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. 7. Based on observation, the building was not maintained in a safe manner by not maintaining bathroom components. This would effect residents using the bathroom by exposing them to hazards.	C 189		

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C 189	Continued From page 7 Findings on 03/11/2015: a. The towel rack in room 215 bath has come loose. b. The toilet seat in room 222 bathroom is coming loose. c. The sink is coming loose in the Womens Visitor bathroom 8. Based on observation, the building electrical system was not maintained in a safe manner. This would effect all residents by potentially overloading electrical circuits. Findings from 03/11/2015: a. An outlet expansion device was observed in room 130. Provide a UL-listed, grounded power strip with over current protection per NFPA 70. b. Access to the electrical panels in the 200 Hall Living Room Storage room is blocked.	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	C 199		

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C 199	Continued From page 8 (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 03/11/2015: a. The exhaust fan in the Laundry is not working. b. The exhaust fan in the Soiled Utility/Hopper Room is not working.	C 199		