

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL064020	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/11/2015
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HUNTER HILL ASSISTED LIVING

**891 NOELL LANE
ROCKY MOUNT, NC 27804**

(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	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 Home for the Aged serving 64 residents on April 1, 1985. Therefore the facility must meet the 1984 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1978 North Carolina State Building Code Section 409 Institutional Occupancy - Group I. Deficiencies were noted which will require a 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: 1. Based on observation, the building was not	C 101		

CONSTRUCTION SECTION
APR 22 2015
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Division of Health Service Regulation

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

TITLE

(X6) DATE

DATE FORM

6020

11RV21

If continuation sheet 1 of 7

Challen & Charlotte Simms Administrator 4-20-15

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C 101	Continued From page 1 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: The 1-hour fire resistance rated kitchen ceiling is penetrated by multiple HVAC vents connected to flexible plastic duct in the attic, which are not protected by radiation dampers.	C 101	New radiation Dampers ordered to be installed no later than 5/10/15	5/10/15
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 emergency illumination was not maintained in a safe manner. This would effect all residents by not keeping the exits visible in an emergency. Findings on 03/11/2015: The following Emergency lights are not working: a) Emergency Light #3, b) Emergency Light #12,	C 189	4-13-15 have extra Batteries on hand now	4/13/15

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C 189	Continued From page 2 c) Emergency Light # 16 2. 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. The attic firewall over 100 Hall cross corridor doors was penetrated by wires b. The attic firewall over 200 Hall cross corridor doors was penetrated by wires c. The draftstop walls over the center section are penetrated by wires. d. The corridor ceiling has an unprotected penetration by conduit by the Lounge Exit door. e. The Lounge storage room ceiling has unprotected penetrations by conduit and pipe, f. The Beauty Shop ceiling has unprotected penetrations, g. Room 137 closet ceiling has an unprotected penetration by CATV cable, h. Room 132 closet ceiling has an unprotected penetration, i. Ceiling of Water Heater Room at 113 is damaged. j. There is an unprotected opening above the fluorescent light fixture in the Laundry Room ceiling,	C 189	Completed New Battery repair before Completed Completed before Scheduled to be repaired Scheduled to be repaired before Scheduled to be repaired before Scheduled to be repaired before Scheduled to be repaired before Scheduled to be repaired before Scheduled to be repaired before Scheduled to be repaired before	4/13/15 5-5-15 4-3-15 4-3-15 5-5-15 5-5-15 5-5-15 5-5-15 5-5-15 5-5-15 5-5-15

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C 189	Continued From page 4 smoke detectors were dirty in the HVAC unit over the Kitchen.	C 189	Completed.	4-3-15
	b. There is no access door to inspect and clean the sample tubes in the HVAC unit over the Kitchen.		Scheduled to be repaired 5-5-15	5-5-15
	5. Based on observation, egress from all areas was not maintained in a safe manner by having refrigerator and freezer doors that could not be unlocked in the event of lock in. This would expose all working in the refrigerator and freezer to a lock in hazard. Findings on 03/11/2015: a. Both freezer and refrigerator latch emergency release mechanisms have been disabled.		Completed	4-3-15
	6. Based on observation, the building was not maintained in a safe manner because a toilet is coming loose from the floor. This would effect all residents using the hall toilet by exposing them to leaks from a broken wax seal. Findings on 03/11/2015: Bathroom 132 has a toilet coming loose from the floor. Secure.		Scheduled to be repaired by 5-5-15	5-5-15
	7. Based on observation, the building was not maintained in a safe manner because doors were not maintained properly. This would effect all residents using the doors by exposing them to the passage of smoke. Findings on 03/11/2015: a. The corridor door to the shower near room 136 is scrubbing the frame		Scheduled to be repaired by 5-5-15	5-5-15
	b. The Dining Room doors have kick downs		Scheduled to be repaired by	5-5-15

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C 189	Continued From page 5 c. Room 133 corridor door is missing the strike plate.	C 189	Scheduled to be repaired by 5-5-15	5-5-15
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 (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: Exhaust fans are not working in the following locations: a. The shower room near room 136 b. The shower room near room 130, c. The bathroom of room 102, d. The tub Room near room 107,	C 199	Scheduled to be repaired by 5-5-15	5-5-15
			To be repaired by	5-5-15
			To be repaired by	5-5-15
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C 199	Continued From page 6 e. The Laundry,	C 199	Scheduled to be repaired by 5-5-15	5-5-15