

COPY

PRINTED: 06/11/2015
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL075010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/14/2015
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NAME OF PROVIDER OR SUPPLIER
LAURELWOODS

STREET ADDRESS, CITY, STATE, ZIP CODE
**1062 WEST MILLS STREET
COLUMBUS, NC 28722**

(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 Report of Biennial Construction Survey by Dennis Harrell on 5-14-2015. Records indicate this facility was either first licensed or submitted for licensure on 3-12-1999, for 60 residents with 24 of those in a Special Care Unit. Based on this information we are requiring the facility to meet the 1996 "Homes for the Aged and Disabled - Minimum Standards and Regulations", applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 w/ '98 rev Edition of the North Carolina State Building Code; Section 409, Institutional Occupancy - Group I.	C 000	<p>Please see Attached.</p> <p>CONSTRUCTION SECTION JUL 7 2015 RECEIVED</p>	
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: 1. Based on a review of documents, the most recent sprinkler system inspection report, dated 3-10-2015, listed a deficiency that must be corrected. No documentation was available to indicate the deficiency had been corrected. The deficiency is listed below as shown on the inspection report: When the sprinkler system was tested, the electric alarm bell did not work. 2. Based on a review of documents, the most recent Fire Safety Inspection was more than a year ago. Failure to have the building and safety	C 111		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Kenny Walker

TITLE

Maintenance Dir.

(X6) DATE

6/22/15

STATE FORM

5099

509C21

If continuation sheet 1 of 5

990209

Division of Health Service Regulation

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Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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C 111	Continued From page 1 systems inspected and approved as required could result in systems not operating properly in the event of an actual fire.	C 111		
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: Based on observation, the hose on the shower wand in the Beauty Salon was long enough to reach the sink basin and there was no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixture present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed.	C 166		
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.	C 189		

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C 189	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> Based on observation, the facility was not maintained in a safe condition because of a delayed egress lock not opening when a force of 15 pounds was applied as required. Findings include: The delayed egress lock in the laundry area required a force of at least 100 pounds to begin the process to open the door. Based on observation, the facility was not maintained in a safe condition because the fire alarm system was indicating a "Trouble" condition. The fire alarm system tested OK and the facility was aware of this condition and had contacted a repair service. However, a fire alarm system that is showing a trouble condition cannot be relied upon to work properly in an actual fire. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: <ol style="list-style-type: none"> Unsealed cable penetration in the smoke barrier wall between the 100 and 200 Halls, Unsealed conduit sleeve in the smoke barrier wall between the 100 and 200 Halls, Holes in the wall in Storage room 1A, Holes in the wall in the kitchen, Residential foam insulation used to seal holes in the ceiling of Mechanical room K. Residential foam is not approved for use in Institutional Occupancies. Holes in the ceiling in in the sprinkler riser room, 	C 189		

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C 189	Continued From page 3 g. Holes in the wall in Utility room 3. 4. Based on observation, a corridor door is not closing well enough 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; The door to the main laundry is Special Care had sagged leaving a opening at the top of the door. 5. Based on observation, the facility was not maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability of the fire sprinkler system to extinguish a fire. Findings include; Items had been stacked almost to the ceiling in the closet off room 344.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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:	C 191		

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C 191	Continued From page 4 Based on observation, there was a portable electric heater in the Dietician office.	C 191		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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: Based on observation, the facility was not maintained in a safe condition because of hot water too hot in an area of the building. Excessively hot water can burn residents or staff. Findings include: The water tested 121 degrees F in room 222.	C 195		

Division of Health Service Regulation
HAL075010
LaurelHurst Retirement Community

CONSTRUCTION SECTION
JUN 24 2015
RECEIVED

Plan of Correction

C 111 Must Have Current Sanitation and Fire Safety Reports

Sanitation report attached.

Fire Safety is scheduled for July 2, 2105. Will send report immediately

Sustained Compliance: Maintenance Director will make sure Sanitation & Fire Reports are immediately accessible to inspector on future visits.

Section 300 Physical Plant:

1. "When the Sprinkler System was tested the Alarm Bell did not work."

A new bell was ordered and has been installed; working correctly

Sustained Compliance: Maintenance Director to check at time of monthly safety checks.

2. "Fire Safety Inspection more than a year ago."

This Year's inspections scheduled for July 2. Will provide record of that inspection as soon as available.

Sustained Compliance: Keep Schedule available for Inspector

C 166 Based on observation: hose of shower wand in the beauty salon had no vacuum breaker provided. Vacuum breaker must be installed.

Part on order and will be installed as soon as received.

Sustained Compliance: Check after installation to make sure there is no contaminated water in the system.

C 189 Based on observation: delayed egress lock not opening when a force of 15 pounds was applied as required.

This lock was adjusted on the day of inspection; 5/14/2015.

Sustained Compliance: Test all egress locks for release with proper pressure. (15 lbs)

"The fire alarm system was indicating a "Trouble" condition. The fire alarm system tested OK and the facility was aware of this conditions and had contacted a repair service. "Trouble system cannot be relied on to work properly.

Part ordered on 6/10/15. Will be repaired on or before 6/26/2015.

Sustained Compliance: Verify on 30 day checks that alarm is working.

Based on Observation:

a. Unsealed cable penetration in the smoke barrier wall between 100-200 hall



- b. Unsealed conduit sleeve in the smoke barrier wall between the 100 and 200 hall
- c. Holes in the wall in Storage room 1A
- d. Holes in the wall in the kitchen
- e. Residential Foam insulation used to seal holes in the ceiling of Mechanical room K. Residential foam is not approved for use in institutional occupancies.
- f. Holes in the ceiling in the riser room
- g. Holes in the wall in utility room 3.

All repairs completed 6/22/2015

Sustained Compliance: Maintenance to monitor and repair as needed.

Based on Observation: The door to the main laundry in Special Care had sagged leaving a opening at the top of the door.

Repaired on day of inspection; 5-14-2015

Sustained Compliance: Maintain all doors with no opening to allow smoke.

Items stacked almost to the ceiling in room 344.

Moved items on day of inspections; 5-14-2015

Sustained Compliance: Monitor storage so items are not stacked to high.

C 191 Unvented fuel burning room heaters and portable electric heaters are prohibited

Portable electric heater observed in Dietician Office.

Heater removed from premises day of inspections 5/14/2015.

Sustained Compliance: No electric heaters allowed.

C 195 Based on Observation: The facility was not maintained in a safe conditions because of hot water too hot in an area of the building. Excessive hot water can burn an resident or staff. The water tested 121 degrees F in room 222.

Cleaned filters and fixture. Reset temperature to 115

Sustained Compliance: Test water in resident rooms monthly.

Respectfully Submitted,

Susan S. Blair
Executive Director

SERVICE REQUEST

FORWARD TO YOUR ACCOUNTS PAYABLE DEPARTMENT

BOOK #

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TR # 4-1-15

TASK/CALL #

2790 Fairforest Cloverdale Rd
Spartanburg, SC 29304
P 800-934-5539 F 804-687-8510

LICENSE #

PROJECT # 32418188

NAME <u>Laurel House</u>	
ADDRESS (OR ATTENTION OF) <u>Kenny Walker</u>	
ADDRESS <u>1264 West Mills St</u>	
CITY <u>Columbus</u>	STATE <u>NC</u>
TR. PRIMAL DATE	BILL
NON-BILL	SER. COMPL
AGE CODE	NAT. ACCT.

CUSTOMER PURCHASE ORDER		
LABOR - REG.	LABOR - OT	LABOR - DT
<u>12</u>		
TRAVEL - REG.	TRAVEL - OT	TRAVEL - DT
MIN.	INSR. MONTH	
PHONE	MILES	
<u>878.884.3900</u>		

"PUT CUSTOMER STAMP ON ALL 3 PAGES"

CONSTRUCTION WORK STOPPED
MAY 24 2015
RECEIVED

WE STRONGLY RECOMMEND IMMEDIATE CORRECTION OF ANY DEFICIENCIES/IMPAIRMENTS IDENTIFIED. WE URGE YOU TO NOTIFY THE LOCAL AUTHORITY HAVING JURISDICTION AND YOUR INSURANCE CARRIER WITHOUT DELAY.
SimplexGrinnell, proposes to furnish the work, and/or materials hereinafter described, subject to the terms and conditions outlined below.

I authorize SimplexGrinnell to proceed with the work as agreed to and outlined below:

6-2-15

Customer signature

Date

PAYMENT TERMS

Time and Material

DEPOSIT \$

Price Not to Exceed \$

BALANCE DUE \$

IMMEDIATE

COD

NET 10

Fixed Price of \$

BILLABLE

NON-BILLABLE

SCOPE OF WORK / PROBLEM CODE To replace 1 electric bell

WORK PERFORMED / RESOLUTION CODE replaced and receive 1 electric bell

GRP	PRODUCT I.D.	SERIAL # / DESCRIPTION	QTY.	COST	NO.	USG.	UNIT PRICE
		<u>Simon Simon Electric bell</u>	<u>1</u>				
SYSTEM TYPE/LOCATION			CONTACT NAME		TOTALS		

IMPORTANT NOTICE TO CUSTOMER

Customer acknowledges and agrees to the terms and conditions on the reverse side of this Service Request, agrees that the services have been completed to Customer's satisfaction and that the system is in good working order and repair, unless services performed were of a temporary nature, in which case Customer acknowledges that part of customer's system may have been bypassed or is otherwise inoperable until service can be completed. CUSTOMER'S ATTENTION IS DIRECTED TO THE LIMITATION OF LIABILITY, WARRANTY, INDEMNITY AND OTHER CONDITIONS ON THE REVERSE SIDE.

CUSTOMER ACCEPTANCE

(Customer Acceptance)

(Print Name)

SIMPLEXGRINNELL LP

(SimplexGrinnell Representative)

(Print Name)