

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL013007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/17/2016
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NAME OF PROVIDER OR SUPPLIER CAREMOOR RETIREMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 4876 CAREMOOR PLACE KANNAPOLIS, NC 28081
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(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
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C 000 Initial Comments

Report of Biennial Construction Survey by Dennis Harrell on 2-17-2016.

Records indicate this facility was first licensed on 8-22-1993 for 30 residents. Therefore, we are requiring that this facility meet the 1991 "Regulations for Homes for the Aged and Disabled; Minimum Standards and Regulations, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1991 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I).

C 000

CONSTRUCTION SECTION
MAR 29 2016
RECEIVED

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 review of documents, a current fire alarm inspection report were not available in the home for review.
- Based on review of documents, the most recent sprinkler inspection report, dated 7-13-2015, indicated deficiencies and no documentation was available to indicate the deficiencies had been corrected.
Deficiencies include:
 - Flow switch damaged and/or electrical connections insecure.
 - The ball control valves were not locked or supervised.

C 111

The

(see attached report)
The inspection was done on 3/17/16

3/17/16

il called Carolina Fire control on 3/15/16 to schedule work to be done on Sprinklers

4/18/16

this will be fixed by 4/30/16

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Ante Walker</i>	TITLE Director of Operations	(X8) DATE 4/30/16
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C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.</p> <p>This Rule is not met as evidenced by: Based on observation, there was trash in and obstructing the corridor at the right rear of the facility.</p>	C 150	<p>This was cleaned up 2/17/16 The house keeper sat this down instead of taking out to the dumpster.</p>	
C 168	<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: 1. Based on Observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: a. One large oxygen cylinder was stored without the required bolt on stabilizing base. b. Several (7) medium portable medical oxygen cylinders were stored in no container. c. Several (20) small portable medical oxygen cylinders were stored in cardboard delivery boxes.</p>	C 168	<p>All oxygen companies brought in metal stands to hold oxygen bottles.</p>	3/10/16

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C 186	Continued From page 2 2. Based on observation there was a double cylinder deadbolt installed on the door to bedroom J. Latching hardware that requires a key to operate from the inside of the room, such as double cylinder deadbolts, present the possibility that someone could be trapped in the room. 3. Based on observation, a cover was missing on an exterior receptacle. Missing covers on exterior electrical outlets allow water to enter and could be hazardous.	C 186	The key hole in dead bolt has been filled in so that no key can go in the hole. The cover has been replaced on the exterior electrical outlet.	2/18/16
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 facility was not maintained in a safe condition because an exit light was not working. Finding includes: One exit light in the dining room was not working. 2. 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	C 189	The exit light has been replaced.	2/18/16

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C 189	<p>Continued From page 3</p> <p>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:</p> <p>a. Damaged 1 hour rated attic access door in housekeeping closet,</p> <p>b. Damaged 1 hour rated attic access door in the kitchen,</p> <p>c. Hole in the kitchen ceiling,</p> <p>d. Cardboard patch on the ceiling in the water heater room.</p> <p>3. Based on observation, many corridor doors are prevented from closing quickly or do not latch or properly fit the door frame 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. The door to the beauty parlor was wedged open,</p> <p>b. The door to the clean linen room was wedged open,</p> <p>c. The door to the laundry was propped open with a tub of clothes,</p> <p>d. The door to bedroom PA would not latch when closed.</p> <p>e. The door to bedroom KR would not latch when closed.</p> <p>f. One dining room door was wedged open,</p> <p>g. The other dining room door was propped open.</p> <p>h. Several corridor doors had sagged and were not fitting the frame at the top to be smoke resisting,</p> <p>i. Several bedroom doors were not closing against the door stop to be smoke resisting,</p>	C 189	<p>All holes have been repaired.</p> <p>All doors have been fixed to stay open on their own, and have been repaired to be smoke resistant.</p>	<p>3/1/16</p> <p>3/7/16</p>

NFPA-72

Date: 3/17/16
 Time: 9:00 AM

Service Organization

Name: SPECTRUM SALES NC INC.
 Address: 2295 Kannapolis Hwy.
Concord, NC 28027
 Representative:
 Telephone: 704-782-4411

Property Name (User)

Name: CareMore Retirement Center
 Address: 4876 CareMore Place
Kannapolis, NC 28081
 Owner Contact:
 Telephone:

Monitoring Entity

Contact: Cops Monitoring
 Telephone: 1855-854-1526
 Monitoring
 Account No. 1201-2760

Approving Agency

Contact:
 Telephone:

Type Transmission

- McCulloch
- Multiplex
- Digital
- Reverse Priority
- RF
- Other (Specify)

Service

- Weekly
- Monthly
- Quarterly
- Semi-annually
- Annually
- Other (Specify)

Panel Manufacturer: Fire-Lite
 Circuit Styles: B+Y
 No. of Circuits: 1
 Software Rev:

Model No.: MS-9200UDLS

Last Date System Had Any Service Performed:
 Last Date System Software or Configuration was Revised:

ALARM INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity Of	Circuit Style	
7	B	MANUAL STATIONS
		ION DETECTORS
17	B	PHOTO DETECTORS
7	B	DUCT DETECTORS
		HEAT DETECTORS
1	B	WATERFLOW SWITCHES
2	B	SUPERVISORY SWITCHES 2000 <u>Tamper</u>
1	B	OTHER: (SPECIFY) <u>Hood (Ansul)</u>
2	B	2000

ALARM INDICATING APPLIANCE AND CIRCUIT INFORMATION

Quantity Of	Circuit Style	
9	B	BELLS
		HORNS
		CHIMES
5	B	STROBES
		SPEAKERS
		OTHER: (SPECIFY) _____ Tamper

NO. OF ALARM INDICATING CIRCUITS ARE CIRCUITS SUPERVISED? 1
YES

SUPERVISORY SIGNAL INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity Of	Circuit Style	
N/A	N/A	BUILDING TEMP.
		SITE WATER TEMP.
		SITE WATER LEVEL
		FIRE PUMP POWER
		FIRE PUMP RUNNING
		FIRE PUMP AUTO POSITION
		FIRE PUMP OR CONTROLLER TRBL.
		GENERATOR IN AUTO POSITION
		SWITCH TRANSFER
		GENERATOR ENGINE RUNNING
		OTHER: (SPECIFY) _____

SIGNALING LINE CIRCUITS

Quantity and style (See NFPA 72, Table 3-6.1) of signaling line circuits connected to system:

Quantity: 1 Style(s): Box

SYSTEM POWER SUPPLIES

a. Primary (Main)----->

Overcurrent Protection: Ckt. Breaker

Location: ----->

Disconnecting Means: ----->

b. Secondary (Standby)

Storage Battery:----->

AC Voltage: 120

Amps: 20

Panel Number: _____

Location: _____

Amp-Hr Rating: 12V

Hours: 12 Ah

Engine-drive generator dedicated to the fire alarm system:

Location of fuel storage: #REF!

TYPE BATTERY

Dry Cell: _____

Nickel Cadmium: _____

Sealed Lead Acid X

Other (Specify): _____

c. Emergency or standby system used as a backup to primary supply, instead of using a secondary pwr supply:

N/A Emergency system described in NFPA 70, Article 700

1 Legally required standby described in NFPA 70, Article 701

1 Optional standby system described in NFPA 70, Article 702, which also meets the performance of Article 700 or 701.

EMERGENCY COMMUNICATIONS

EQUIPMENT

	VISUAL	FUNCTIONAL	COMMENTS
PHONE SET	N/A	N/A	
PHONE JACKS			
OFF-HOOK INDICATOR			
AMPLIFIER(S)			
TONE GENERATORS			
CALL IN SIGNAL			
SYSTEM PERFORMANCE			

INTERFACE EQUIPMENT

	VISUAL	FUNCTIONAL	SIMULATED OPERATION
ELEV RECALL	N/A	N/A	
ELEV SHUNT TRIP			

SPECIAL HAZARD SYSTEMS

SPECIAL PROCEDURES

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COMMENTS

ON/OFF PREMISES MONITORING

	YES	TIME	COMMENTS
ALARM SIGNAL	✓	10:30	
ALARM RESTORED	✓	10:30	
TROUBLE SIGNAL	✓	10:30	
SUPERVISORY SIGNAL	✓	10:30	
SUPERVISORY RESTORAL	✓	10:30	

NOTIFICATION THAT TESTING IS COMPLETE

	YES	TIME	WHO
BUILDING MANAGEMENT	✓	10:45	Management
MONITORING AGENCY	✓	11:00	Cops Monitoring
BUILDING OCCUPANTS	✓	10:45	Staff
OTHER (SPECIFY)			

THE FOLLOWING DID NOT OPERATE PROPERLY

SYSTEM RESTORED TO NORMAL OPERATION

DATE: ~~3/17/16~~ 3/17/16
 TIME: 10:45 AM

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH NFPA STANDARDS

INSPECTOR: Brad Childress DATE: 3/17/16
 SIGNATURE: Brad Childress TIME: 10:45 AM

OWNER OR REPRESENTATIVE: Alfreda Rice DATE: 3/17/16
 SIGNATURE: Alfreda Rice TIME: 10:45 AM