

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060139	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/12/2017
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NAME OF PROVIDER OR SUPPLIER REGENCY AT PINEVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 9120 WILLOW RIDGE DRIVE CHARLOTTE, NC 28210
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller and Billy Bryant, conducted on January 12, 2017.</p> <p>Records indicate this facility was first licensed on May 28, 1997 as a Home for the Age. The facility is currently licensed for 119 Beds with a 20 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure.</p> <p>Deficiencies were cited that require a Plan of Correction..</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>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</p>	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 101	Continued From page 1 Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Based on observation, the Building was not maintaining the exit enclosures for egress only in accordance with the Building Code. Findings on January 12, 2017 a. 1st Floor Right Front Stair Tower - a time clock station with table and bulletin board were in the exit enclosure.	C 101		
C 148	Corridors-Handrails 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 was not providing handrails in the corridor that could support 250 pounds. This deficiency affects residents, staff and visitors who use unstable handrails by not providing increase safety, stability/balance, and maneuverability provide by these devices. Findings on January 12, 2017 a. Corridor near Bedroom 310 - the handrail was loose, and may not support a 250 pound concentrated load. b. Corridor near Bedroom 214 - the handrail was loose, and may not support a 250 pound concentrated load.	C 148		

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C 150	Continued From page 2	C 150		
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: 1. Based on observation, corridors were not free of all equipment and other obstructions. This would affect all residents, staff and visitors by slowing or obstructing egress during an emergency. Findings on January 12, 2017 a. Stair Tower near Beauty Shop - this space was being used to store chairs, equipment and supplies.</p>	C 150		
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (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 facility failed to prevent chronic unpleasant odors. This would affect residents, staff and visitors by exposing them to an unpleasant environment. Findings on January 12, 2017</p>	C 164		

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C 164	Continued From page 3 a. 3rd Floor Tub Room - the plumbing traps to the tub, sink and floor drain may have dried-up, allowing smelly sewer gases to enter the Building. b. 1st Floor Tub Room near Bedroom 106 - the plumbing traps to the tub, sink and floor drain may have dried-up, allowing smelly sewer gases to enter the Building.	C 164		
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: 1. Based on Observation, the facility failed to maintain the building in an uncluttered, clean and orderly manner. Findings on January 12, 2017 a. 3rd Floor Restroom near Bedroom 312 - the exhaust fan and its radiation damper had an excessive accumulation of dust/lint. b. 3rd Floor Light Blub Storage Room - the HVAC return and its radiation damper had an excessive accumulation of dust/lint. c. 3rd Floor Laundry - the exhaust fan and its radiation damper had an excessive accumulation of dust/lint. d. 2nd Floor Laundry - the exhaust fan and its radiation damper had an excessive accumulation of dust/lint. e. 1st Floor Laundry - the exhaust fan and its radiation damper had an excessive accumulation	C 166		

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C 166	<p>Continued From page 4</p> <p>of dust/lint.</p> <p>f. 2nd Floor Restroom near Emma's Craft Room12 - the exhaust fan and its radiation damper had an excessive accumulation of dust/lint.</p> <p>g. 1st Floor Kitchen- the HVAC returns and its radiation dampers have an excessive accumulation of dust/lint.</p> <p>2. Based on Observation, the Building was not maintained free of hazards, because the portable medical oxygen cylinders were not being properly handled/stored. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile.</p> <p>Findings on January 12, 2017</p> <p>a. 1st Floor SCU Pantry - a portable medical oxygen cylinder was stored standing not secured to the structure.</p>	C 166		
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.</p> <p>(c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved.</p> <p>(f) This Rule shall apply to new and existing facilities.</p>	C 185		

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C 185	Continued From page 5 This Rule is not met as evidenced by: 1. Based on Record review and interview with Executive Director/Administrator/Maintenance Director/Manager the facility failed to document the fire plan. This deficiency affects all by not finding weakness or opportunities for improving evacuation responses. Findings on January 12, 2017 a. The fire plan rehearsal records included date, time, shift, and staff members present but little to no description of what the rehearsal involved.	C 185		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff and visitors by not providing ground fault protection to these devices. Findings on January 12, 2017 a. 2nd Floor Bedroom 230 - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power and could not be tested for ground fault.	C 188		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 189		

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C 189	<p>Continued From page 6</p> <p>(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.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the Building was not maintained in a safe and operating condition, by not having a properly working delayed egress system. This could affect all residents, staff and visitors by potentially delaying or stopping exiting in an emergency</p> <p>Findings on January 12, 2017</p> <p>a. 1ST Floor Right Rear Exit - the delayed egress locked door, did not initiate the irreversible process to unlock within 15/30 seconds, when the release device was depressed.</p> <p>b. 1st Floor SCU Front Exit - the delayed egress locked door leaf, swinging into the Assisted Living side, did not initiate the irreversible process to unlock within 15/30 seconds, when the release device was depressed. This is not in conformance with the Code Requirement that the process begin within 3 seconds and is irreversible.</p> <p>c. 1st Floor SCU Front Exit - the delayed egress locked cross-corridor double egress doors, have one delayed egress signs mounted above the doors and centered between the leafs. The leafs must have a delayed egress sign on their individual leafs, push side.</p> <p>2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>to restrict smoke. This could affect all residents, staff and visitors by not containing the smoke of the fire in the compartment of origin.</p> <p>Findings on January 12, 2017</p> <p>a. Smoke Barrier near Bedroom 108 - the right leaf, of the double-egress cross-corridor doors, did not close because the Kitchen Hood exhaust was generating negative pressure which was pulling the door open.</p> <p>.</p> <p>3. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, all to fire/smoke if not contained in Room or compartment of origin</p> <p>Findings on January 12, 2017</p> <p>a. 3rd Floor Media Room Closet with Roof Access - there was a 16 inch x16 inch hole in the wall around the roof hatch ladder not firestopped through the fire-resistance-rated wall assembly.</p> <p>b. 3rd Floor Electric Closet - a firestop cable penetration had its sealant pulled out of the penetration of fire-resistance-rated ceiling, leaving an unprotected opening.</p> <p>c. 3rd Floor Electric Closet - there was a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>d. 3rd Floor Electrical Closet near Laundry - there were two open-ended sleeves with cable bundles not firstopped as them penetrate the fire-resistance-rated ceiling assembly.</p> <p>e. 2nd Floor Electric Closet - a firestop cable penetration had its sealant pulled out of the penetration of fire-resistance-rated ceiling, leaving an unprotected opening.</p> <p>f. 1st Floor Main Electrical Room - a hole in the fire-resistance-rated gypsum ceiling assembly, was patched with a gypsum board that did not have joint compound and tape.</p> <p>g. 1st Floor Main Electrical Room near Electrical</p>	C 189		

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C 189	<p>Continued From page 8</p> <p>Panels - there was a broken acoustical ceiling tile and one acoustical ceiling tile did not seat in its track.</p> <p>4. Based on Observation, fire rated doors of hazardous areas were not being maintained in a safe and operating condition. Findings on January 12, 2017</p> <p>a. 3rd Floor Laundry - the corridor door (45 min rated, self-closing) had a ¼ inch hole all the way through the door.</p> <p>b. 2nd Floor Laundry - the corridor door (45 min rated, self-closing) had a ¼ inch hole all the way through the door.</p> <p>c. 1st Floor Laundry - the corridor door (45 min rated, self-closing) had two ¼ inch holes all the way through the door.</p> <p>5. Based on observation, the electrical system was not being maintained safe. Findings on January 12, 2017</p> <p>a. 1st Floor Main Electrical Room - many items are being stored directly in front of the electric panels, preventing quick access in any emergency.</p> <p>b. 1st Floor SCU Electrical Room - many items are being stored directly in front of the electric panels, preventing quick access in any emergency.</p> <p>6. Based on observation, the interior doors were not maintained in a safe and operating condition. Findings on January 12, 2017</p> <p>a. 3rd Floor Media Room Close Right Corridor Door - the corridor door did not latch into its frame when closed.</p> <p>b. 3rd Floor Bedroom 319 - the corridor door will not close because it hits its doorframe.</p> <p>c. 1st Floor The Library - the corridor door did not latch into its frame when closed.</p>	C 189		

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C 189	<p>Continued From page 9</p> <p>d. 1st Floor The Cafe - the corridor door did not latch into its frame when closed.</p> <p>e. 1st Floor Kitchen - both self-closing doors to the dining room were equipped with barrel bolts. When the bolts are extended and not inserted into the receptor the bolt will not allow the door the close and latch.</p> <p>f. 1st Floor Kitchen - the right self-closing door to dining does not close and latch on its own power.</p> <p>7. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect residents, staff and visitors by not providing early detection and activating the fire alarm system. Findings on January 12, 2017</p> <p>a. 3rd Floor Maintenance Shop - the smoke detector was covered with a plastic cover. Deficiency corrected before Construction Surveyors departed the site.</p> <p>8. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff and visitors if smoke/fire is not contained in the Room or compartment of origin. Findings on January 12, 2017</p> <p>a. 3rd Floor Electric Closet - the fire sprinkler escutcheon plate had dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>9. Based on Observation, the Building was not maintained in a safe condition. This could affect all by not containing smoke and fire in the room of origin. Findings on January 12, 2017</p> <p>a. 2nd Floor Innovative Scrub Care - the corridor door had a mechanical kick -down</p>	C 189		

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C 189	Continued From page 10 holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch b. 2nd Floor Bedroom 202 - the corridor door had a door wedge holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch. c. 2nd Floor Bedroom 206 - the corridor door had a door wedge holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch. d. 2nd Floor Bedroom 218 - the corridor door had a door wedge holding the door open, preventing the rapid release of the door with a push or pull of the door, to close and latch.	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: 1. Based on Observation, the facility failed to prevent the use of portable electric space heater(s) in an Adult Care Home. This could affect residents, staff and visitors if heater was the ignition source of a fire. The danger increases if used by resident or combustible material were	C 191		

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C 191	Continued From page 11 near. Findings on January 12, 2017 a. 3rd Floor Nursing Office - a portable space electric heater was found in this room.	C 191		