

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL044022</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/29/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CHESTNUT PARK RETIREMENT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>84 CHESTNUT PARK DRIVE WAYNESVILLE, NC 28786</b>
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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
C 000	<p>Initial Comments</p> <p>Report of Construction Section Biennial Survey by Dennis Harrell on 3-29-2017</p> <p>Records indicate this facility was first licensed on 1-3-1977. A document provided by the facility indicates that it was first licensed in 1973 and an addition to the building in 1982 increased the total capacity to 20 beds. Based on this information, we are requiring the older portion of the facility to meet the 1967 NC State Building Code-Section 407.1 Group D-2 Institutional Occupancy, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the current rules for Adult Care Homes of Seven or More Beds. The newer portion of the building, to the right of the fire wall at the living room, was reviewed using the 1978 NC State Building Code, the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, and the applicable portions of the current rules for Adult Care Homes of Seven or More Beds.</p>	C 000		
C 166	<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:</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, there was no documentation of the required monthly inspections on the range hood fire suppression</p>	C 166		

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

TITLE

(X6) DATE

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C 166	Continued From page 1  system. In addition to semiannual certification, range hood fire suppression systems must be inspected monthly and the inspections must be documented, such as on a tag provided at the system pull.  2. Based on observation, there was no key onsite to allow entry into rooms 5 and 6 to survey for hazards. Keys must be maintained onsite for all spaces.  3. Based on observation, the toilet in the bathroom between rooms 1 and 3 was loosely mounted to the floor. Loose toilets can cause leaking and/or fall hazards.	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.  This Rule is not met as evidenced by: 1. Based on observation, the fire alarm system is not maintained in a proper operating condition. Findings include: Two smoke detectors were tested with smoke. They both sensed the smoke and latched but there was a delay of about 2 minutes before the system sounded an alarm.	C 189		

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C 189	<p>Continued From page 2</p> <p>2. Based on observation, many corridor doors are prevented from closing quickly and latching 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.</p> <p>Findings include;</p> <ul style="list-style-type: none"> <li>a. The door to bedroom 7 will not close and latch.</li> <li>b. The door to bedroom 8 does not latch consistently when closed.</li> <li>c. The door to bedroom 9 does not fit the opening properly to be resistant to the passage of smoke.</li> </ul>	C 189		