

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL059027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/01/2017
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NAME OF PROVIDER OR SUPPLIER
ROSE HILL RETIREMENT COMMUNITY

STREET ADDRESS, CITY, STATE, ZIP CODE
**120 FLEMING AVENUE
MARION, NC 28752**

(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 Construction Section Biennial Survey by Dennis Harrell on 3-1-2017. Records indicate this facility was first licensed on 1-16-1998, as a Home for the Aged. The facility is currently licensed for 87 Beds. 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 1991 Edition of the North Carolina Building Code(s), Section 409-Institutional Unrestrained Occupancy, and the 1991 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure.	C 000		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 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 ice machine drain line was laying directly on the floor. Ice machine drain lines that are not maintained at least 2 inches above the floor or floor drain, as required by Code, could cause the ice to become contaminated. 2. 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	C 166	<i>Ice machine drain was raised to be maintained 2 inches above the floor drain.</i> <i>Beauty shop sink faucet and hose was replaced & vacuum washer is on.</i>	<i>3/2/17</i> <i>3/10/17</i>

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

Froyla M. Malachuk

TITLE

Rd/Administrator

(X6) DATE

3/28/17

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C 166	Continued From page 1 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. 3. Based on observation, the floor drain cover was not attached in the 3rd floor soiled utility. Open floor drains are a trip and fall hazard.	C 166	<i>3rd floor soiled utility drain cover attached to floor.</i>	3/2/17
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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. (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. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on a review of documents, the records available onsite included no description of what the rehearsal involved. 2. Based on review of documents, fire drill rehearsals are not being done regularly with at least one per shift each quarter. Failure to rehearse the fire plan could lead to confusion and delay in an actual emergency. Findings include:	C 185	<i>See documentation attached. Fire drill rehearsals are done at least quarterly. These drills have been done this way for over 14 years with no problems ever cited by inspector. The records indicate date and time & staff members present. Will increase documentation of description of rehearsal. Shifts are combined for some drills at shift change so each employee may learn from other employees. 1st shift usually has more experienced staff and can assist with teaching of newer employees. On site maintenance employee is state level 3 fireman & level 2 instructor.</i>	3/1/17

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C 185	Continued From page 2 a. In the 3rd quarter of this year, there was no rehearsal done during the 2nd shift. b. In the 4th quarter of this year, there was no rehearsal done during the 3rd shift.	C 185	<i>See attached fire drill reports</i>	
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, battery powered emergency lights would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. Findings include the following non-functioning lights: a. Third floor boiler room, b. Laundry. 2. Based on observation, 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. Findings include: a. One of the smoke barrier doors on the 3rd	C 189	<i>See attached fire drill reports.</i> <i>Battery powered emergency lights were replaced in 3/10/17 3rd floor boiler room + laundry</i>	

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C 189	<p>Continued From page 3</p> <p>floor failed to close completely and latch when released by the fire alarm system.</p> <p>b. The 20 minute rated door to the 3rd floor diaper storage room was badly damaged.</p> <p>c. The 20 minute rated door to the 2nd floor dining room was badly damaged.</p> <p>d. The door to bedroom 303 would not latch when closed.</p> <p>e. There was a hole by the latchset through the door to the 3rd floor shower room.</p> <p>f. The latchbolt was missing on the door to the 1st floor living room.</p> <p>3. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in 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:</p> <p>a. Unsealed conduit sleeve through the ceiling of the closet across from the 2nd floor nurse station,</p> <p>b. Unsealed conduit sleeve through the ceiling of the 1st floor mop closet.</p>	C 189	<p><i>3rd floor fire door was fixed so it would close completely and latch.</i></p> <p><i>See attached invoice for doors ordered from 7 Oaks Door Company to replace b, c, d, e, f.</i></p> <p><i>Conduit sleeves were filled with fire retardant caulking recommended by inspector, on 2nd floor nurse station + 1st floor mop closet.</i></p>	<p><i>3/17/17</i></p> <p><i>4/15/17</i></p> <p><i>3/10/17</i></p>

Fixed with filler