

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL060125</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/29/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE PARC AT SHARON AMITY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4025 N SHARON AMITY DRIVE CHARLOTTE, NC 28205</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}	Initial Comments  Report of a Biennial Follow Up Construction Survey by Ed Miller, conducted on March 29, 2017.  The deficiencies cited during the previous Construction Section Biennial Survey have not been satisfactorily corrected and will require a new Plan of Correction.	{C 000}		
C 165	Housekeeping and Furnishings-Sanitation Grade  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times in facilities with 12 beds or less and North Carolina Division of Environmental Health sanitation scores of 85 or above at all times in facilities with 13 beds or more; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: Based on a review of documents, the score for the most recent sanitation inspection for the building was only 82.5. Findings on March 29, 2017: aa. Interview with facility staff revealed that Mecklenburg County Environmental Health is scheduled to reinspect the facility on March 31, 2017.	C 165		
{C 189}	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT	{C 189}		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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{C 189}	<p>Continued From page 1</p> <p>10A NCAC 13F .0311 OTHER REQUIREMENTS</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 fire alarm system was showing a "Trouble" and "Local Silence" condition. Fire alarms in "Trouble" may fail to operate properly when needed.</p> <p>Findings on March 29, 2017:</p> <p>aa. Base on observation the fire alarm system was showing a "Trouble loop 1" and "Local Silence" condition Fire alarms in "Trouble" may fail to operate properly when needed. We recieved documentation that this trouble condition was corrected on 03/30/2017.</p> <p>6. 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> <p>c. The double doors to the dining room would not latch when closed.</p> <p>Findings on March 29, 2017:</p> <p>aa. Base on observation the double doors to the dining room have been equipped with roller hatches.</p> <p>d. The ¾ hour fire rated door to the storage room</p>	{C 189}		

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{C 189}	Continued From page 2 on the second floor was propped open.	{C 189}		