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A BULDING 91 BALOPCINE HOUSE NAME OF PROVIDER OR SUPPLIER STREET ACCRESS, CITY, STATE, 2P CODE 4230 WENDELL BOLL EVARD WENDELL BOLL EVARD WENDELL NC 27531 CA4,20 SUMMANY STATEMENT OF DESCRIPTIONS (EAGLIANTY OR LISC IDENTIFYING INFORMATION) COULTER HOUSE CA4,20 SUMMANY STATEMENT OF DESCRIPTIONS (EAGLIANTY OR LISC IDENTIFYING INFORMATION) CO00 Initial Comments Report of a Construction Section Complaint Survey by Dennis Harrell on 4.4-2017. The Complaint alleged the heat was not working in portions of the facility. Records Indicate that the Facility was first licensed or submitted on 2-12-1897, as a Home for the Aged. The facility as surveyed for conformance with the applicable portions of the 1978 (Revision 8) North Carolina State Building Codels), Section 409.1 - Minimum Standards and Regulations for Homes of Severa or More Bade, and applicable portions of the 1978 (Revision 8) North Carolina State Building Codels), Section 409.1 - Minimum Standards and Regulations for Homes for the Aged (1944) in effect at time of infall scensure. The Complaint was substantiated. C 1889 Belliding 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 is not met as evidenced by 1. Based on observation and interview, the electrical system was not maintained in a safe or operating condition. Obviour or hasen Service Regulation Undokartory defective on Synthesis Services Services Services Services Services Services EXECUTIVE SECTION CA189 MAY 0.2 2017 CONSTRUCTION SECTION CA189		Division of Health Service Regulation STATEMENT OF DEPICIENCIES XXII PROVIDER/SUPPLIER/CLIA XXII MULTIPLE CONSTRUCTION XXII DATE SURVEY							
NAME OF PROVIDER OR SUPPLIER CLIVER HOUSE CLIVER HOUSE A239 WENDELL BOULEVARD WENDELL BOULEVARD WENDELL BOULEVARD WENDELL NO. 27591 PROVIDERS PROVIDERS PLAN OF CONFECTION REGULATORY OR LISE IDENTIFYING INFORMATION) REGULATORY OR LISE IDENTIFYING INFORMATION REPORT of a Construction Section Complaint Survey by Dennis Harrell on 44-2017. The Complaint alleged the heat was not working in portions of the facility. Records Indicate that the Facility was first licensed or submitted on 2-12-1987, as a Home for the Aged. The facility is currently licensed for a 100 beds including a 31-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 1978 (Revision 8) North Carolina State Building Code(s), Section 493.1 - Milnimum Standards and Repulations for Homes for the Aged (1984) in effect at time of initial licensure. The Complaint was substantiated. C 188 Building Equipment Maintained Safe, Operating SECTION, 3000 - PHYSICAL PLANT 10A NACA 13F 30311 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 is not met as evidenced by. This Rule is not met as evidenced by. This Rule is not met as evidenced by. Based on observation and interview, the electrical system was not maintained in a safe or operating condition. CHAPTION SECTION CONSTRUCTION SECTION CONSTRU	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	6-4		COMPLETED			
OLIVER HOUSE WENDELL, NC 27591 DESCRIPTION SUMMARY STATEMENT OF DESCRIPTIONES WENDELL, NC 27591 PROVIDERS PLAN OF CORRECTION SHOULD BE COMPANIONALLY PLAN (CASE ALTINA SHALLD BE CASE ALTINA SHALLD BE COMPANIONALLY PLAN (CASE ALTINA SHALLD BE CASE ALT			HAL092182	B. WING		04/04/2017			
Ox4 Distance statement of concentration Ox4 Distance Dista	NAME OF	WIE OF PROVIDER OR SUPPLIER STREET ADD			DORESS, CITY, STATE, ZIP DODE				
PREFIX TAG REACH CORRECTIVE ACTION SOLUTION TO RECIDENCE OF FULL TAG CODD Initial Comments Report of a Construction Section Complaint Survey by Dennis Harrell on 4-4-2017. The Complaint alleged the heat was not working in portions of the facility. Records Indicate that the Facility was first licensed or submitted on 2-12-1987, as a Home for the Aged. The facility is currently licensed for a 100 beds including a 31-bed special care unit. Therefore the facility was surveyed for conformance with the applicable portions of the 200S Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the Aged. (1984) in effect at time of initial licensure. The Complaint was substantiated. C 1889 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safely, electrical, machanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (K) This Rule is not met as evidenced by: 1. Based on observation and interview, the electrical system was not maintained in a safe or operating condition. Design of Health Service Regulation.	OLIVE	CLIVER HOUSE							
Report of a Construction Section Complaint Survey by Dannis Harrell on 4.4-2017. The Complaint alleged the heat was not working in portions of the facility. Records indicate that the Facility was first licensed or submitted on 2-12-1987, as a Home for the Aged. The facility was first licensed or submitted on 2-12-1987, as a Home for the Aged. The facility is currently licensed for a 100 beds including a 31-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 Bads, and applicable portions of the 1978 (Revision 8) North Carollina State Building Code(s), Section 409.1 - Minimum Standards and Regulations for Homes for the Aged (1984) in effect at time of initial licensure. The Complaint was substantiated. C 1889 Building Equipment Maintained Safe, Operating SECTION 10300 - 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 and interview, the electrical system was not maintained in a safe or operating condition. Duision of Haitin Service Regulation Deboratory directores or Reponters agencies by reporting condition. Duision of Haitin Service Regulation Deboratory directores or Reponters.	PREFIX	(EACH DEFICIENCY MUST BE PRECEDED BY FULL		PREFIX	(EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPROX	ILD BE COMPLETE			
LABORATORY DIRECTOR'S OR PROMDER'S UPPLIER ARCHITECTURE STREET ST	C 189	Report of a Constru Survey by Dennis H The Complaint alleg in portions of the fac Records Indicate the licensed or submitte for the Aged. The fa 100 beds including: Therefore the facility conformance with the 2005 Rules for Lice Seven or More Beds the 1978 (Revision of Building Code(s), So Standards and Regulation of Aged (1984) in effect The Complaint was Building Equipment SECTION .0300 - P 10A NCAC 13F .031 REQUIREMENTS (a) The building and mechanical, and plu care home shall be a operating condition. (k) This Rule shall a facilities with the exc which shall not apply This Rule is not med 1. Based on observe electrical system was operating condition.	arrell on 4-4-2017. ged the heat was not working cility. at the Facility was first and on 2-12-1987, as a Home cility is currently licensed for a a 31-bed special care unit, and applicable portions of the sping of Adult Care Homes of and applicable portions of B North Carolina State ection 409.1 - Minimum ulations for Homes for the stat time of initial licensure. Substantiated. Maintained Safe, Operating HYSICAL PLANT OTHER If all fire safety, electrical, mixing equipment in an adult maintained in a safe and apply to new and existing seption of Paragraph (e) at the evidenced by attention and interview, the		does not constitute an admis or agreement by the facility of truth of fact alleged or concluset forth in the Statement of Deficiency or Corrective Acts REport; the Plan of Corrective prepared solely as a matter compliance with State law.	of the usions ion on is of			
	LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER ARRESENTATIVES: SIGNATURE.								

FAX No.

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	of Health Service Re NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA	(X2) MILL TIES	LE CONSTRUCTION	OVA DATE	9010n/60v	
p., 1101000000000000000000000000000000000		IDENTIFICATION NUMBER:	A. BUILDING		(X3) DATE COMP	CETED	
		HAL092182	B. WING		04/04/2017		
AME OF	PROVIDER OR SUPPLIER	STREET AL	ODRESS, CITY,	STATE, ZIP CODE			
OLIVER HOUSE 4230 WENDELL BOULEVARD							
LIVER	WENDELL, NC 27591						
(X4) ID PREFIX TAG	(EACH DEFICIENCY MUST BE PRECEDED BY FULL		PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(XS) COMPLET DATE	
	Finding includes. The Maintenance staff stated that the through wall heating units in bedrooms 207 and 209 are fed from the same circuit and occasionally the circuit breaker tripps. Throughout the building, the heaters in adjacent rooms are supplied from one electrical circuit. For Rooms 207 and 209, the circuit to each pair of heaters has a 30 amp 2-pole circuit breaker connected to 10 awg copper. However, further investigation revealed that each of the 2 heating units on a single circuit use 15.3 amps in heating mode. That is a combined total of 30.6 amps when both units are heating. The NC State Electrical Code allows a maximum continuous load of 80% of circuit capacityv which is 24 amps or less. Feeding a load of 30.6 amps from a 30 amp circuit is not permissable under the NC State Electrical Code.		C 189	10A NCAC 13F .0311 Other Requirements: The heaters for rooms 207 and 209 were placed on separ breakers by Streamline Plumb Electric on 2-11-2017.	rate		
The state of the s	was not maintained i Findings include: a. An electrical circu installed in the electri CPVC water pipe cor male connector had i conduit, b. The outlet plate w the heat/ac unit in be deficiency was correct	ation, the electrical system in a safe condition. It had been improperly ical room off the TV room. Innected to a PVC water pipe been used as electrical as missing on the outlet for diroom 209. Note; This sted during the survey.		The PVC water pipe was repli with a metal conduit, This was by Streamline Plumbing and Electrical on 4-18-2017.			
F		OTHER heating system sufficient to F (24 degrees C) under	C 190		1990 Chandal on the decide on one or supplying a		

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	Division of Health Service Regulation								
		TATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA		(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY			
1	AND PLAN	PLAN OF CORRECTION IDENTIFICATION NUMBER:		A. BUILDING: 01		COMPLETED			
1						1			
			HAL092182	B. WING		04/	04/2017		
	NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, STATE, ZIP CODE					
1	AL KED	Mouthr	4230 WEN	DELL BOL	JLEVARD .				
l	OLIVER	IVER HOUSE			LL, NC 27591				
	(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 GROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		COMPLETE DATE		
Ì	C 190	190 Continued From page 2					1		
ı	0 .00			C 190			1		
ı		tollowing shall apply appliances.	to heaters and cooking						
ŀ			neaters, if used, shall be						
۱		installed or protecte	d so as to avoid burn hazards		1				
ļ		to residents and roo							
l	i		apply to new and existing		1				
l	1	which shall not another	ception of Paragraph (e) y to existing facilities.						
		willon strain not appr	to existing racindes.						
l		'			The heating system was repla	hene			
l		This Rule is not me			on 4-14-2017 with a brand no		i		
ı	- 1	Based on observation	on, the heating system was		PTAC.				
1	2	not maintained in a v Finding includes:	working condition.		1 17.0.				
ı			at/ac unit in the TV room was						
ı	i	blowing air but would							
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