

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034100	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 09/14/2017
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NAME OF PROVIDER OR SUPPLIER
SOMERSET COURT AT UNIVERSITY PLACE

STREET ADDRESS, CITY, STATE, ZIP CODE
**1635 EAST 5TH STREET
WINSTON SALEM, NC 27101**

(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 Construction Section Biennial Survey by Ed Miller conducted on September 14, 2017. Records indicate this facility was first licensed on 12-7-1999, for 60 residents. Based on this information we are requiring the facility to meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 North Carolina State Building Code; Section 409 Institutional Occupancy - Group I. Deficiencies were cited that require a Plan of Correction.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, and interview with Executive Director, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on September 14, 2017: a. A current Annual Sprinkler System Inspection and Testing and Maintenance Report in accordance with NFPA 25, was not available for Surveyor's review.	C 111	Please find attached our Fire Sprinkler report dated June 26, 2017.	

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

TITLE

(X6) DATE

Jammy Estrada

Executive Director

10-24-17

Division of Health Service Regulation

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C 164	Continued From page 1	C 164		
C 164	Housekeeping and Furnishings-Clean, Repaired	C 164		
	<p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</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, the facility failed to keep floors clean and in good repair. Findings on September 14, 2017:</p> <p>a. Bedroom 218 Bathroom - the vinyl floor tiles around the commode are stained yellow.</p> <p>b. Resident Laundry near Bedroom 208 - the vinyl floor tiles were excessively dirty in front of the washer. Deficiency corrected before Construction Surveyors departed site.</p> <p>2. Based on Observation, the facility failed to keep plumbing devices clean and in good repair. Findings on September 14, 2017:</p> <p>a. Bedroom 204 Bathroom- the vertical hand grip (grab bar).in the shower moves a ¼ inch side to side.</p> <p>b. Bedroom 105 Bathroom - the vertical hand grip (grab bar).in the shower moves a ¼ inch side to side.</p> <p>3. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on September 13, 2017:</p> <p>a. Bulk Laundry - the ventilation grille with its radiation damper has an excessive accumulation</p>		<p>We have contacted BMS to strip and wax bedroom 218 Bathroom floor tiles around the commode that are stained yellow.</p> <p>Estimated completion date: 11/10/2017.</p> <p>Resident Laundry near Bedroom 208 floor was cleaned in front of the washer on 9/14/17 before Construction Surveyor departed site.</p> <p>Bedroom 204 Bathroom vertical hand grip (grab bar) in the shower was repaired. 9/14/17</p> <p>Bedroom 105 Bathroom vertical hand grip (grab bar) in the shower was repaired. 9/14/17</p> <p>ventilation Bulk Laundry - ventilation grille with its radiation damper that had excessive accumulation of dust and lint was cleaned. 10/11/17</p>	

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C 164	Continued From page 2 of dust/lint. b. Bulk Laundry - the required exhaust ventilation system did not work, and there was odor. c. Hopper Room - the required exhaust ventilation system did not work, and there was odor.	C 164	Bulk Laundry and Hopper Room ventilation system and presented an odor was repaired. Replaced Exhaust motors.	9/20/17
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 Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on September 14, 2017: a. Bedroom 230 - one portable medical oxygen cylinder is stored standing up not secured to the structure. Deficiency corrected before Construction Surveyors departed site. b. Executive Directors Office - three portable medical oxygen cylinders are stored standing under her desk not secured to the structure. Deficiency corrected before Construction Surveyors departed site. c. 100 Hall Storage - seven portable medical oxygen cylinders are stored standing up in a beverage crate not secured to the structure. Deficiency corrected before Construction	C 166	Bedroom 230-one portable medical oxygen cylinder that was stored standing up not secured to the structure was corrected before Construction Surveyors departure. The three portable medical oxygen cylinders stored under the Executive Director's desk was corrected before Construction Surveyors departure. The 100 Hall storage that held seven portable medical oxygen cylinder that were stored standing up in a beverage crate not secured to the structure was corrected before Construction Surveyors departure.	9/14/17 9/14/17 9/14/17

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C 166	Continued From page 3 Surveyors departed site.	C 166		
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 Record review and interview with Executive Director/Administrator/Maintenance Director/Technician/Manager, fire drill rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on September 14, 2017: a. In the 2nd quarter of the last 12 months, no rehearsals are documented for the 1st and 3rd shifts.	C 185	Executive Director will ensure that fire drill rehearsals are performed regularly with at least one per shift for each quarter.	9/14/17
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	C 189		

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C 189	Continued From page 4 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 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 to restrict smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on September 14, 2017: a. Smoke Barrier near Bedroom 209 - the back leaf, of the double-egress cross-corridor door, did not latch when the fire alarm system released the doors. Deficiency corrected before Construction Surveyors departed site. b. Smoke Barrier near Beauty Shop - the cross-corridor double-egress doors do not have an astragal to provide a smoke tight seal between the meeting edges of the doors when the fire alarm system released the doors. 2. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on September 14, 2017: a. Exit near Bedroom 219 - the exit sign has both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit, but the way out is straight. b. Left Side Exit near Dining - the exit sign has both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit, but the way out is straight.	C 189	Smoke Barrier near Bedroom 209-the back leaf, of the double-egress cross-corridor door that did not latch when the fire alarm system released the door was corrected before Construction Surveyor departed site. Smoke Barrier near Beauty Shop, the cross-corridor double egress doors did not have an astragal to provide a smoke tight seal between the meeting edges of the doors when the fire alarm system released the doors has been repaired. The Exit near Bedroom 219 -the exit sign has both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit but the way out is straight has been corrected. Chevron signs have been covered to indicated the Exit is straight ahead. Left Side Exit near Dining-the exit sign has both chevron directional indicators punch-outs removed, indicating that you should turn left and right to exit, but the way out is straight has been corrected. The right side has been covered indicating the correct way out is to turn left to Exit.	9/14/17 10/12/17 10/17/17 10/17/17

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C 189	Continued From page 5 c. Smoke Barrier on the Beauty Shop - the exit sign had the left chevron directional indicator punch-outs removed, indicating that you should turn left to exit, but the way out is straight. 3. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on September 14, 2017: a. Bedroom 220 - two extension cords with multiple plug ends were being used to power multiple items. Extension cords cannot substitute for permanent wiring. b. Men Public Restroom - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not reset after the test button was pushed. c. Women Public Restroom - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power and could not be tested for ground fault. d. Employee Lounge Restroom - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power and could not be tested for ground fault. e. Dining - a light fixture near the front door is falling down from the ceiling. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on September 14, 2017: a. Kitchen - per the attached maintenance tag,	C 189	Smoke Barrier on the Beauty Shop-the exit sign had the chevron directional indicator punch-outs removed, indicating that you should turn left to exit has been corrected.Both chevron directional indicators have been covered. The sign now indicates the way out is straight. Bedroom220-the two extension cords with multiple plug ends were being used to power multiple items have been removed. Mens Public restroom-the ground fault circuit interrupter (GFCI) electrical power receptable that did not reset after the test button was pushed has been repaired. The Women Public restroom-the ground fault circuit interrupter (GFCI) electrical power receptable that did not have electrical power and could not be tested has been corrected. The Employee Lounge restroom-the ground fault circuit interrupter (GFCI) that did not have electrical power and could not be tested for ground fault has been corrected. The dining light fixture near the front door that was falling down from the ceiling has been repaired.	10/17/17 9/15/17 9/14/17 9/14/17 9/14/17 10/11/17

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C 189	Continued From page 6 the commercial kitchen hood's fire suppression system had its last semi-annual maintenance performed in January of 2017. 5. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in Room or compartment of origin. Findings on September 14, 2017: a. Storage/Maintenance Office - there was an open-ended sleeve with a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.	C 189	The commercial kitchen hood's fire suppression system that had its last semi-annual maintenance performed in January of 2017- Executive Director contacted Inspector to complete the semi annual maintenance inspection for the 2nd half of 2017. Storage/Maintenance Office-the open-ended sleeve with a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly has been repaired with UL Fire rated caulk.	Est. 11/10/17 9/14/17
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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 provide ventilation in areas where odors are generated or required. This could affect all residents, staff and visitors by subjecting them to	C 199		

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C 199	Continued From page 7 odors. Findings on September 14, 2017: a. Storage Room with Mop Sink near Dining - there was no exhaust ventilation system and odor is present.	C 199	Storage Room with Mop Sink near Dining- where there was no exhaust ventilation system and odor was present has been corrected. New Motors were installed.	9/20/17

ODYSSEY FIRE PROTECTION, LLC

210 Old Dairy Road Suite 1A Wilmington, NC 28405

Telephone: 910-392-6400 or 336-414-2311

FIRE SPRINKLER INSPECTION REPORT

Water Based Fire Sprinkler Inspection

Property Information

Business Name:	Somerset Court of University Place		
Business Address:	1635 E. 5 th Street Winston-Salem, NC 27101		
Business Contact:	Tammy Estrada, Executive Director		
Business Telephone:	336-722-7119		
Inspection Date:	June 26, 2017	Inspection Type:	Annual

Inspector Information

Inspector:	Maurice Melton, Jr.	License Number:	8096
Inspector's Signature:	<i>Maurice Melton, Jr.</i>		

General Inspection Items

	YES	NO	N/A		YES	NO	N/A
BUILDING				Hydraulic nameplate, if supplied, attached securely and legible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building(s) occupied?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIPING			
Has use/occupancy remained unchanged?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visible piping appears properly aligned?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the building(s) remained unmodified and no additions made to building since last inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Visible piping appears leak free?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
System(s) in-service upon arrival?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visible piping appears properly pitched, if dry pipe system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
System(s) left in-service at conclusion of inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visible piping appears free of mechanical damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm system put on test before inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visible piping appears free of rust or corrosion?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alarm monitoring company received alarm signals and system clear?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visible hangers and/or seismic bracing appear attached?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wet pipe areas appear to have adequate heat?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Visible piping free of external loads?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GAUGES & HYDRAULIC CARD				ALARM & OTHER DEVICES			
Dry pipe valve areas provided with permanent heat and are operational?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exterior alarm device(s) operated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building owner/occupant informed of requirement to maintain adequate heat during freezing weather?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interior alarm device(s) operated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gauges in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Low air pressure alarm(s) operated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gauges appear to indicate proper pressure?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Low temperature alarm if provided operated?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Gauges older than 5 years replaced or recalibrated?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water flow devices operated?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gauges are of the proper type and listing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air maintenance device(s) operates properly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Quick Opening Device(s) (QOD) operates properly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

General Inspection Items cont.

	YES	NO	N/A		YES	NO	N/A
SPRINKLER HEADS				FDC identification sign(s) in-place?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible sprinklers appear free of corrosion?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FDC check valve not leaking?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible sprinklers appear properly aligned?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FDC automatic drain valve in-place and not leaking?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible sprinklers spray pattern appears free of obstructions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FDC clapper in-place and operable (if caps/plugs are not in-place)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible sprinklers appear not "loaded" and/or free of foreign material?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FDC interior inspected if caps/plugs are missing?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible sprinklers in spray coating areas appear properly protected from overspray?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VALVES incl. ALARM VALVES			
Visible sprinklers in spray coating areas not covered with excessive overspray?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Control valves sealed, locked or supervised?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible sprinklers paint free?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control valves free from external leaks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible sprinkler glass bulbs appear full of liquid?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control valves (including PIVs) properly identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible sprinklers damage free and listed assembly parts not missing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Control valves (including PIVs) accessible, have adequate clearance and not damaged?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spare heads box installed and proper number of spare heads available?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control valves (including PIVs) in proper position?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sprinkler wrench or socket available for spare heads?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Control valves (including PIVs) operated throughout their full range and returned to their correct position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visible sprinklers manufactured prior to 1920 replaced?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Control valves (including PIVs) provided with appropriate wrenches?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible sprinklers in-service for 50 years replaced or a representative sample removed for testing?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	OS&Y control valve stems lubricated?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible fast response sprinklers in-service for 20 years tested?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PIVs opened until spring or torsion felt in rod?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Visible solder-type extra high (325°F) sprinklers exposed to maximum temperature conditions removed for testing?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PIVs and OS&Ys backed 1/4 turn from full open?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Recalled sprinkler heads replaced?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fire hose valves have hose connected or caps installed?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FIRE DEPARTMENT CONNECTION				Fire hose valves have hand wheels attached and are not damaged?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fire Department Connection (FDC) visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Alarm valves accessible and not damaged?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FDC accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trim valves in proper position?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FDC swivels/couplings undamaged & rotate smoothly?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Retard chamber drip free?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FDC caps/plugs in-place and undamaged?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dry pipe valve(s) intermediate chamber not leaking?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FDC gaskets in-place & in good condition (if caps/plugs are not in-place)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Dry pipe valve(s) priming water level tested?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Dry pipe valve(s) interior cleaned (if not an external reset)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Flow Test						
Riser Number	Static Pressure	Residual Pressure	Alarms Activate	Alarm Time	PIV Turns	Results Comparable
Dry	65	45	Yes	20 sec.	--	New Insp.
Wet	65	45	Yes	20 sec.	--	New Insp.

Dry, Pre-Action & Deluge Valve Test						
Riser Number	Air Pressure	Low Pressure Alarm Operated	Alarms Activate	QOD Operated	Low Points Drained	Results Comparable
Dry	40	Yes	Yes	Yes	Yes	New Insp.

Dry, Pre-Action & Deluge Valve Trip Test										
Riser Name or Number: Dry										
Valve Information					Quick Opening Device (QOD)					
Make	Model	Serial No.			Make	Model	Serial No.			
Viking	F1	00254852			Viking	D2	7521			
Year Mfg.	Size	Type			Year Mfg.					
2004	4 inch	Dry Pipe			2003					
Trip time thru outlet		Water Pressure	Air Pressure		Trip Point Air Pressure	Time water reached outlet		Alarm Operated		
Min. Sec.		PSI	PSI		PSI	Min	Sec	Min	Sec	
Without QOD		--	--		--	--	--	--	--	
With QOD		0	19	65	35	33	1	30	0	20

Property Information			
Business Name:	Somerset Court of University Place		
Business Address:	1635 E. 5th Street Winston-Salem, NC 27101		
Business Contact:	Tammy Estrada, Executive Director		
Business Telephone:	336-722-7119		
Inspection Date:	June 26, 2017	Inspection Type:	Annual
Notes & Comments			
1. This was the first inspection of this location for Odyssey Fire Protection, LLC.			
2. Both Systems: The date of the last 5 year internal obstruction investigation is unknown.			
3. Wet Riser: The discharge piping from the Pressure Relief Valve to the Main Drain Valve drain pipe was constructed out of ½ inch white PVC pipe and was not "glued" together. The PVC pipe blew apart when the Main Drain Valve was flowed as required during the inspection.			
Deficiencies Identified			
1. Riser Room: The four (4) pressure gauges - two (2) air and two (2) water pressure are dated between 2002 and 2012, making them from five (5) to fifteen (15) years old. The NFPA 25 Standard states that gauges are to be recalibrated or replaced every five (5) years. Recommend replacing all four (4) gauges.			
2. Interior of building: There are two (2) missing white escutcheon rings in the following locations: Room 125 and Room 221 closets. The installed heads are RASCO F1/RES SIN R3912 155°F K3.9 white pendants. The NFPA 25 Standard requires that missing assembly parts including escutcheon rings be replaced. Recommend replacing these missing escutcheon rings.			