

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL013007	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/10/2018
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NAME OF PROVIDER OR SUPPLIER CAREMOOR RETIREMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 4876 CAREMOOR PLACE KANNAPOLIS, NC 28081
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller conducted on January 10, 2018.</p> <p>Records indicate this facility was first licensed on 8-22-1993 for 30 residents. Therefore, we are requiring that this facility meet the 1991 "Regulations for Homes for the Aged and Disabled; Minimum Standards and Regulations, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1991 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I).</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;</p>	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, the facility failed to meet the Code requirements in effect at the time of construction or alteration by not having doors that have an occupant load of more than 50 to swing in the direction of egress. Findings on January 10, 2018: a. Cross-Corridor Pair of Doors on Left Corridor - these doors do not swing in the direction of egress, which is towards the front exit or smoke barrier. 2. Based on observation, the Building did not meet the code requirements in effect at the time of construction or alteration, by not providing all required exits with exit signs. This could affect all by not providing egress directions for a prompt evacuation of the building. Findings on January 10, 2018: a. Cross-Corridor Pair of Doors on Left Corridor - on the left side, there is no exit sign directing you through these doors, towards the front exit or the smoke barrier.	C 101		
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 Maintenance Manager and Business Office Manager, the facility failed to maintain in the facility, current (completed within the last twelve	C 111		

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C 111	Continued From page 2 months) annual inspection report(s) required by this Rule. Findings on January 10, 2018: a. A current Annual Fire Alarm System Inspection and Testing Report in accordance with NFPA 72, was not available for review by the Surveyor.	C 111		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on January 10, 2018: a. Short Corridor near M's & V's Bedroom - there is a table in the corridor decreasing the required six feet width to three feet eight inches.	C 150		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities.	C 164		

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C 164	Continued From page 3 This Rule is not met as evidenced by: 1. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on January 10, 2018: a. M's & V's Shared Restroom - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint. b. C's Shared Restroom - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint.	C 164		
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, a hazard is present due to the possibility of the backflow of contaminated water into the domestic water supply. Findings on January 10, 2018: a. Front Shower Room - the right shower, with a four inch curb, has a handheld showerhead with a long enough hose that the showerhead could be submerged in contaminated water. This hose did not have a vacuum breaker to prevent the backflow of contaminated water into the domestic water supply. b. Front Shower Room - the right shower, with a	C 166		

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C 166	Continued From page 4 four inch curb, has a handheld showerhead on a long enough hose that it could be submerged into the non-potable gray water. This hose did not have a vacuum breaker to prevent the backflow of non-potable gray water into the domestic water supply. 2. 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 January 10, 2018: a. Room 14 - several portable medical oxygen cylinders are stored standing up and laying down not secured.	C 166		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to grow larger. This would affect all residents, staff, and visitors by not identifying emergency equipment not in proper working order. Findings on January 10, 2018: a. Entire Building - since the last annual maintenance, performed in July 2017, there has been no documentation of the portable fire	C 183		

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C 183	Continued From page 5 extinguisher's monthly inspections.	C 183		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 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 not maintained in a safe and operating condition. This would affect all by not providing smoke and fire control in the corridor.</p> <p>Findings on January 10, 2018:</p> <p>a. Cross-Corridor Double Egress Smoke Barrier Doors - when the fire alarm system activated, the hold open devices did not released their automatic-closing doors to contained the smoke and fire in the compartment of origin.</p> <p>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.</p> <p>Findings on January 10, 2018:</p> <p>a. Corridor near V's Bedroom - the wall-mounted self-contained emergency light did not illuminate on backup power whens the test button is pushed.</p> <p>b. Dining Room - the right side wall-mounted</p>	C 189		

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C 189	<p>Continued From page 6</p> <p>self-contained emergency light did not illuminate on backup power when the test button is pushed.</p> <p>c. Kitchen - the front wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed.</p> <p>d. Kitchen - the back ceiling mounted self-contained combination exit sign/emergency light unit did not illuminate on backup power when the test button was pushed.</p> <p>3. 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 of origin. Findings on January 10, 2018:</p> <p>a. Right Side of Smoke Barrier - - there is a hole adjacent to the exit sign not firestopped as it penetrates the fire-resistance-rated wall assembly.</p> <p>b. Electrical/Boiler Room, - there are two open-ended sleeves with a cable bundles not firestopped as they penetrate the fire-resistance-rated ceiling assembly.</p> <p>4. Based on Observation, the smoke tight corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on January 10, 2018:</p> <p>a. Dining Room - the corridor doors have wedges holding these doors open. This prevents the rapid release of the doors with a light push or pull of the door, to close and latch.</p> <p>b. S's Bedroom - the corridor door did not latch into its frame when closed.</p> <p>c. P's Bedroom - the corridor door did not latch into its frame when closed.</p> <p>d. Housekeeping Closet - the corridor door has a wedge holding the door open. This prevents the rapid release of the door with a light push or pull</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>of the door, to close and latch.</p> <p>e. Clean Linen - the corridor door's handset did not cover the through hole created for the hardware installation.</p> <p>5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on January 10, 2018:</p> <p>a. C's Bedroom - an extension cord with a multi-plug adaptor is being used to power a television. Extension cords cannot substitute for permanent wiring.</p> <p>b. B's Bedroom - plugged into an electrical power receptacle is a multi-plug power cord that does not have over current protection.</p> <p>c. Beauty Shop - plugged into an electrical power receptacle is a multi-plug power cord that does not have over current protection. . This citation occurs twice in this room.</p> <p>6. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin. Findings on January 10, 2018:</p> <p>a. Boiler Room near Kitchen - the fire sprinkler escutcheon plate had dropped down from the fire-resistance-rated ceiling exposing an opening that would not stop the spread of fire and smoke.</p> <p>b. Examination of the fire sprinkler riser revealed the pressure gauge on the accelerator is registering about 7 psi. This could indicate an abnormal condition.</p> <p>7. Based on observation the facility failed to maintain the exhaust ventilation equipment in rooms required to be mechanically exhausted. Findings on January 10, 2018:</p>	C 189		

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C 189	Continued From page 8 a. Women Restroom - the exhaust ventilation system is not working. b. Men Restroom - the exhaust ventilation system is not working. c. Laundry - the exhaust ventilation system is not working. d. Private Restroom near IL - the exhaust ventilation system is not working. e. Restroom near IL - the exhaust ventilation system is not working.	C 189		