

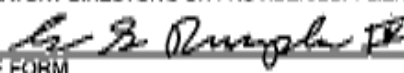
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL080019	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/14/2018
NAME OF PROVIDER OR SUPPLIER BEST OF CARE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 234 NORTHDAL AVENUE KANNAPOLIS, NC 28081	
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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on March 14, 2018. Records indicate that this Facility was licensed as a HA facility with a capacity of Twenty Five (25) Residents on October 13, 1987. Based on this information we are requiring the facility to meet the 1984 Homes for the Aged and Disabled "Minimum Standards and Regulations" and the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or more Beds along with the 1978 Revision 8 Edition of the North Carolina State Building Code Volume I - General Construction Section 409 - Institutional Occupancy - (I). Deficiencies were cited that require a Plan of Correction.	C 000	See Attached for Corrections and dates
C 101	Existing Licensed Fac- No less than '71 Rules 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;	C 101	

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

TITLE

(X6) DATE



Administrator

4-13-18

STATE FORM

6800

UC7721

If continuation sheet 1 of 6

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, and interview with Administrator, the facility, which is equipped with Special Locking (magnetic locks) on the exit doors, failed to meet the requirements as defined by the NC State Building Code in effect at the time of construction or alterations, which permits the installation of Special Locking on exit doors of buildings that are protected throughout, by an approved supervised automatic fire detection system or an automatic sprinkler system. In buildings that are not protected throughout, there could be a dangerous delay in detecting the start of a fire. Findings on March 14, 2018: a. Closets of the Entire Building - there is no supervised automatic fire detection system in the closets. b. Lobby Vestibule - there is no supervised automatic fire detection system in the Vestibule. 2. Based on observation there is failure to provide components as required by the building code. Failure to provide components required by building code could affect occupants of the facility if the equipment did not function when and as required to unlock exit doors in the event of an emergency evacuation. Findings on March 14, 2018: a. Sun Room Exit - when the local on/off emergency release switch was switch to off, the "Special Locking System" for this door did not release the locked door. b. Sun Room Exit - when the fire alarm system was activated, the "Special Locking System" for this door did not release the locked door. c. Fire Alarm Control Panel - the "Special Locking System" does not have an informational	C 101		

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C 101	Continued From page 2 wiring diagram and a system components location map posted at the FACP.	C 101	<i>May we receive ← clarification on this deficiency. (2.c.)</i>	
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 Technician/Manager the Facility failed to document a short description of what the rehearsal involved. This deficiency affects all by not finding weakness or opportunities for improving evacuation responses. Findings on March 14, 2018: a. The rehearsal records included the date, time, shift, and staff members present, but little to no description of what the rehearsal involved.	C 185		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet	C 188		

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C 188	Continued From page 3 locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on March 14, 2018: a. Nurse Station - the electrical power receptacle near the sink is within six feet of the sink, and is not ground fault protected.	C 188	
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, 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 March 14, 2018: a. Corridors interstation at the Nurse Station - the front face of the exit sign did not illuminate on backup power when tested.	C 189	

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C 189	Continued From page 4 2. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke. Corridor door must positively/automatically latch into their frame under normal closing force. This could affect all residents, staff, and visitors if the doors did not latch to contain smoke/fire in the room of origin. Findings on March 14, 2018: a. Laundry - the corridor door will not latch into its frame, unless you lift up on the door.	C 189			
C 185	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 maintain the hot water temperature at all fixtures used by residents to be a minimum of 100 degrees Fahrenheit and shall not exceed 116 degrees Fahrenheit. Findings on March 14, 2018: a. Front Restroom - the sink had a hot water	C 195			

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C 195	Continued From page 5 temperature of 125 degrees Fahrenheit. b. Shower Room - the sink had a hot water temperature of 120 degrees Fahrenheit.	C 195		

Best of Care

Assisted Living

234 Northdale Ave. Kannapolis, NC 28081

PHONE (704)933-4339 FAX (704)933-4427

PLAN OF CORRECTION FOR BUILDING INSPECTION ON 3/14/2018

C 101 – EXTISTING LICENSED FACILITY '71 RULES

PHYSICAL PLANT REQUIRMENTS – 10A NCAC 13F .0301

1. Closets and Lobby needs heat sensors installed – Entire Building
 - - Quote for installation received from contractor on 3/19
 - - Installation Scheduled for 4/16-4/19 by Lefler Electronics, Inc
2. Wander Guard Door Locks need to release when local emergency release is engaged –Sun Room, Basement Doors
 - - Contractor notified, work completed on 4/9 by Spectrum Sales Co.
3. Wander Guard Door Locks need to release when Fire Alarm is active – Sun Room Door
 - - Contractor notified, work completed on 3/21 by Spectrum Sales Co.
4. Fire Alarm Control Panel needs “special locking system” Information, wiring diagram, components information at FACP.
 - - Need clarification, if possible, from DHSR.
 - - Will discuss with Lefler Electronics Inc. on 4/19 about this task.

C185 – FIRE SAFETY REHEARSALS

PLAN FOR EVACUATION – 10A NCAC 13F .0309

1. Fire Rehearsal records needs short description of what the rehearsal involved, as well as date, time, shift, and staff members involved.
 - - Management discussed and policy adjusted 3/15
 - - Staff will be notified of changes at annual meetings on 4/13 & 4/16

C188 – ELECTRICAL OUTLETS IN WET LOCATIONS**ELECTRICAL OUTLETS – 10A NCAC 13F .0310**

1. Electrical receptacle near NS sink needs ground fault protection – Nurse Station
 - - Contractor notified and necessary items purchased – 4/6
 - - Waiting to hear back from electrical contractor – 4/12

C189 – BUILDING EQUIPMENT MAINTAINED SAFE**OTHER REQUIRMENTS – 10A NCAC 13F .0311**

1. Illuminated Exit Sign needs to work under backup power – Nurse Station
 - Exit Sign was replaced and is working properly – 3/19
2. Laundry Door to corridor needs to latch – Laundry Room
 - Latch and frame plate adjusted and door closes properly – 3/19

C195 - HOT WATER SYSTEM**OTHER REQUIRMENTS – 10A NCAC 13F .0311**

1. Front 1st Restroom sink hot water exceeded 116 degrees F (125F)
2. Main Shower Room sink hot water exceeded 116 degrees F (120F)
 - Hot water heater mixer was adjusted – 3/19
 - Management will check temperatures more often.