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Division_	of Health Service Re	equiation					
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLI IDENTIFICATION N		DER/CLIA UMBER:	(X2) MULTIP A. BUILDING	LE CONSTRUCTION 3: 01	(XB) DATE 5 COMPL		
		HAL080019		B. WING		03/14	/2018
NAME OF F	ROVIDER OR SUPPLIER		STREET AD	DRESS, CITY.	STATE, ZIP CODE		
			234 NORT	HDALE AV	ENUE		
BEST OF	CARE ASSISTED LI	VING		DLIS, NC 2			
(X4) ID PREFIX TAG	(ÉACH DÉFICIENC)	TEMENT OF DEFICIENCE Y MUST BE PRECEDED 8' SC IDENTIFYING INFORM	Y FULL	PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPROVIDENCY)	D 85	GOMPLETE DATE
C 000	Initial Comments			C 000	See Attached	C-,-	
		uction Section Bienr cted on March 14, 2			See Attached t	dates	ļ ī
	Records indicate the A HA facility with a Residents on October information we are the 1984 Homes for "Minimum Standard applicable portions Adult Care Homes with the 1978 Revis Carolina State Build Construction Section Occupancy - (I).	pet this Fecility was I capacity of Twenty For 13, 1987. Based requiring the facility or the Aged and Disads and Regulations" of the 2005 Regulation 8 Edition of the ding Code Volume I on 409 - Institutional cited that require a Financian series.	icensed as live (25) on this to meet bled and the tions for eds along North - General				
C 101	Correction. Existing Licensed F	Fac- No less than '7'	Rules	C 101			
	PHYSICAL PLANT The physical plant care home shall be (2) Except where of licensed facilities of facilities shall meet requirements in efficiency of change in service of renovation, or alter- the requirements for no addition or renovation or renovation or renovation maintain and Des Regulations" for "H copies of which are Health Service Regulations of the requirements of the requireme	APPLICATION REQUIREMENTS requirements for ea- applied as follows: otherwise specified, r portions of existing clicensure and code ect at the time of co or bed count, addition ation; however in no or any licensed facilion vation has been ma ments found in the 1 irred Standards and comes for the Aged a pavailable at the Div quiation at no cost;	ch adult existing licensed nstruction, n, case shall ty where de, be less 971 and Infirm",				
LABORATORY	baith Service Regulation DIRECTOR'S OR PROVID	DERVSUPPLIER REPRESE	NTATIVE'S SIG	NATURE	TITLE	(X8) DATE
162	- B Quin				Administrator		13-18
STATE FOR	4			4400	UC7721	If continuation	on sheet 1 of 6

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Division of Health Service Regulation							
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		HAL080019		B. WING		03/14	/2018
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0 101	Continued From pa	ge i		0 101			l I
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	This Rule is not me						i I
	 Based on obse 						
	Administrator, the fa						
	Special Locking (ma						
	doors, failed to mee						1 1
	by the NC State Bu						
	time of construction			ļ			
	the installation of S	pecial Locking on e	xit doors of				
	buildings that are p	rotected throughout	, by an				
	approved supervise			i			1 1
-	system or an autom						
,	buildings that are no						
	could be a dangero	us delay in detectin	g the start				
	of a fire.	44 0040:		}			
	Findings on March						
	a. Closets of the E	ntire Building - thei	e is no	1			1 1
	supervised automa	tic fire detection sys	tem in the	1			l I
	closets.	. Hara la an arrage	donal	i			1 1
	 b. Lobby Vestibule automatic fire detection 	e = there is no super	Viseo Voctibula				
	automatic tire detec	tion system in the v	restibule.				
	2 Based on obee	rvation there is failu	ro to				
	Based on observoide component						
	code, Failure to pro	vide components re	outred by				
	building code could	affect occupants of	the facility				
	if the equipment did						
	required to unlock 6						
	emergency evacual		114 401 400				
	Findings on March						
		- when the local on	/off				
	emergency release						
	"Special Locking Sy						
İ	release the locked						
	b. Sun Room Exit						
	was activated, the "						
	this door did not rel	ease the locked do	br.				
	 Fire Alarm Con 						
	Locking System" do	es not have an info	rmațional				
	ealth Service Regulation				11 111 111		
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GEACH DEPICIENCY MUST BE PRECEDED BY FULL TAG COntinued From page 2 wiring diagram and a system components location map posted at the FACP. 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 shift description of what the rehearsal involved. (f) 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 188 Electrical Outlets in Wet Locations C 188 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet	BEST OF	CARE ASSISTED LI	VING			081		
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Division	of Health Service Re	egulation					
STATEMEN	OF CORRECTION	(X1) PROVIDER/SUPPLIDENTIFICATION N	ER/GLIA JMBER:	(X2) MULTIPL A. BUILDING:	E GONSTRUCTION 01	(X3) DATE 8 COMPLE	JRVEY STED
		HAL080019		8. WING		03/14	/2018
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C 188	Continued From pa	ge 3		C 188			
	locations at sinks, b building shall have						
	This Rule is not me 1. Based on Obse provide electrical or with ground fault int residents, staff, and ground fault protect Findings on March a. Nurse Station a receptacle near the sink, and is not ground	rivation, the facility to atlets in wet location terrupters. This wou I visitors by not provion to these devices 14, 2018; the electrical power sink is within six fe	s at sinks, ld affect iding 3.				
C 189	Building Equipment	Maintained Safe, C	perating	C 189			
	SECTION .0300 - F 10A NCAC 13F .03 REQUIREMENTS (a) The building an mechanical, and plu care home shall be operating condition. (k) This Rule shall facilities with the ex which shall not app	d all fire safety, electronic ambing equipment in maintained in a safesply to new and exception of Paragrap	n an adult e and kisting h (e)				
	This Rule is not me 1. Based on obse emergency equipm safe and operating if they could not pro during an emergency Findings on March a. Corridors inters the front face of the backup power when	rvation, the building ent was not maintai condition. This wou emptly find their way by. 14, 2018: station at the Nurse exit sign did not illu	hed in a ld affect all to an exit Station -				
ivision of H	ealth Service Regulation M			0079	JC7721	If continuation	n shoot 4 of 8

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Division	of Health Service Re	gulation					
STATEMEN	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLI IDENTIFICATION NO	ER/CLIA JMRER:	(X2) MULTIPL A. BUILDING:	E CONSTRUCTION 01	(X3) DATE S COMPLE	JRVEY STED
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C 189	Continued From pa	ge 4		C 189			
	maintained in a safe because the corridor passage of smoke, positively/automatic under normal closin residents, staff, and latch to contain smo Findings on March a. Laundry - the c	rvation, the Building e and operating con or doors do not resis Corridor door must ally latch into their fact or force. This could it visitors if the doors oke/fire in the room 14, 2018: orridor door will not u lift up on the door	dition, it the rame affect all did not of origin.				
Ċ 195	Hot Water System			C 195			
	provide an adequat kitchen, bathrooms closets and soil utilitemperature at all fibe maintained at a (38 degrees C) and F (46.7 degrees C). (k) This Rule shall facilities with the ex	11 OTHER system shall be of se e supply of hot wate , laundry, housekee ty room. The hot w xtures used by resid minimum of 100 deg shall not exceed 11	r to the ping ater dents shall grees F 6 degrees disting h (e)				
	maintain the hot wa used by residents to degrees Fahrenhei degrees Fahrenhei Findings on March a. Front Restroon	ervation, the Facility ter temperature at a be a minimum of and shall not excert.	all fixtures 100 ad 116				
Division of H	saith Service Regulation V			8800	JC7721	If continuetic	n sheet 5 of 6

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Division	of Health Service Re	guiation							
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		HAL080019		8. WING		03/14	/2018		
NAME OF	PROVIDER OR SUPPLIER		STREET AD	DRESS, CITY, 8	STATE, ZIP CODE				
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C 195	Continued From pa	ge 5		C 195	and the state of t	_			
G 195	temperature of 125 b. Shower Room	ge 5 degrees Fahrenhe - the sink had a hot degrees Fahrenhe	water	G 195					
ivision of H	ealth Service Regulation								



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

- 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.
- 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.
- 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

- 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
- 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

- Front 1st Restroom sink hot water exceeded 116 degrees F (125F)
- 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.