

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032091	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/12/2019
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NAME OF PROVIDER OR SUPPLIER DURHAM RIDGE ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 3420 WAKE FOREST HWY DURHAM, NC 27703
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller and Suzanna Fay, conducted on June 12, 2019.</p> <p>Records indicate this facility was first licensed on February 14, 1991. The facility is currently licensed for 144 Special Care Beds. Therefore, the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1991 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1991 Edition of the North Carolina Building Code, Institutional Occupancy.</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	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 1. Based on observation and interview with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the required components or procedures to properly operated doors equipped with Special Locking Arrangements. This could affect all occupants who would need to evacuate through the door(s). Findings on June 12, 2019: <ol style="list-style-type: none"> a. Entire Building - none of the three staff questioned carried their key to operate the emergency release switches at the exit doors. This is not in accordance with NC State Building Code requirement that if emergency release switches are of the keyed type, then all staff responsible for evacuation of the locked building must always carry their key. b. Gate near Main Dining Porch - the key to the emergency release switch did not turn and release the locked gate. c. Gates near 200 Hall Porch and 300 Hall porch - the key to the emergency release switch did not turn and release the locked gate. Deficiency corrected before Construction Surveyors departed site. d. 400 Hall Firewall - when the fire alarm system is activated, the "Special Locking System" doors do not release, allowing free egress. 	C 101		
C 133	<p>Bathrooms-Hand Grips</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are:</p>	C 133		

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C 133	<p>Continued From page 2</p> <p>(6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents;</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the facility failed to provide all commodes accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures.</p> <p>Findings on June 12, 2019:</p> <p>a. Bedroom 201 Bathroom - the commode does not have a hand grip (grab bar).</p> <p>b. 400 Hall Shower Room - the tub does not have a hand grip (grab bar).</p> <p>c. 400 Hall Shower Room - the commode has a loose side back hand grip (grab bar).</p>	C 133		
C 155	<p>Floors-Non-skid, in Good Repair</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(i) The requirements for floors are:</p> <p>(1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable;</p> <p>(2) Scatter or throw rugs shall not be used; and</p> <p>(3) All floors shall be kept in good repair.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observations, the facility has failed to maintain the floors smooth.</p> <p>Findings on June 12, 2019:</p> <p>a. Entire Building Corridors -with the addition of the new flooring, the clean-out plates are now at least 5/16 of an inch below the new finish floor,</p>	C 155		

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C 155	Continued From page 3 creating a tripping hazard. b. Bedroom 211 - a "Landing Strip" pad is on the floor and there is no resident in the bed. This creates a tripping hazard.	C 155		
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. 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 June 12, 2019: a. Core Hall Beauty Shop - the shampoo sink has a sprayer hose long enough to reach gray water, and there is no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixtures present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed. 2. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on June 12, 2019: a. Main Dining - the HVAC return with its	C 164		

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C 164	<p>Continued From page 4</p> <p>radiation damper has an excessive accumulation of dust/lint.</p> <p>b. Med Room - the HVAC return with its radiation damper has an excessive accumulation of dust/lint.</p> <p>c. 300 Hall Shower Room - the ventilation system with its radiation damper has an excessive accumulation of dust/lint.</p> <p>3. Based on observation, the building walls are not kept clean and in good repair. Findings on June 12, 2019:</p> <p>a. Kitchen Mech Room - the meeting stiles of pair of doors is very dirty.</p> <p>b. Bedroom 101 and 103 shared Bathroom- the door is delaminating.</p> <p>c. Bedroom 212 - the corrido door has a loose door handle.</p> <p>d. 300 Hall Shower Room - in the toilet stall the wall is missing it wall base.</p> <p>e. Bedroom 315 - the wall base is missing between the restroom and closet.</p> <p>f. Bedroom 315 - the wall base is missing between the restroom and closet.</p> <p>g. Corridor between Bedroom 405 and 407 - the wall base is missing.</p> <p>h. Bedroom 409 - the wall base is missing between the restroom and closet.</p> <p>i. 400 Dining - there is a hole in the wall behind the door.</p> <p>4. Based on observation, the building floors are not kept clean and in good repair. Findings on June 12, 2019:</p> <p>a. Entire Building, Water Heater Rooms in the Shower Rooms- the water heater pans are physical damaged and or rusted and water is on the floor.</p> <p>b. Core Hall Laundry - behind the dryer there is build-up of lint.</p>	C 164		

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C 164	<p>Continued From page 5</p> <p>c. 300 Hall Shower Room - a shower head is leaking, and the water is spreading. The water is in the general area of the shower room and the water heater room.</p> <p>d. 400 Hall - the floors are stained and need cleaning.</p> <p>e. 400 Hall Shower Room - water is on the floor.</p> <p>5. Based on observation, the building plumbing fixtures are not kept clean and in good repair. Findings on June 12, 2019: a. Bedroom 401 Bathroom - the faucet is not secured to the sink. b. Bedroom 404 Bathroom - the faucet is not secured to the sink.</p> <p>6. Based on Observation, the facility failed to prevent chronic unpleasant odors. This would affect residents, staff, and visitors by exposing them to an unpleasant environment. Findings on June 12, 2019: a. Bedroom 401 Bathroom - there is a strong odor that persisted during the Construction Survey.</p>	C 164		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p>	C 166		

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C 166	Continued From page 6 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 June 12, 2019: a. Bedroom 307 - four portable medical oxygen cylinders are standing up on the floor in an unapproved cardboard crate not physically secured in racks, stands or chained to the structure.	C 166		
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 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, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on June 12, 2019: a. Bedroom 101 and 103 Bathroom - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not have electrical power and could not be tested for ground fault.	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,	C 189		

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C 189	<p>Continued From page 7</p> <p>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.</p> <p>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 June 12, 2019: a. Kitchen - the exit sign at the exterior door 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. 200 Hall Firewall - on the resident's side, the exit sign does not illuminate on normal or backup power when tested. c. 200 Hall Left Exit - the exit sign does not illuminate on backup power when tested. Exit signs must work on backup power to provide directions during power outages. d. Porch near Generator - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. e. 300 Hall Firewall - on the resident's side, the exit sign has a chevron directional indicators punch-outs removed, indicating that you should turn right to exit, but the way out is straight. f. Corridor near Bedroom 320 - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. g. 400 Hall Left Exit - the exit sign does not illuminate on backup power when tested. Exit signs must work on backup power to provide</p>	C 189		

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C 189	<p>Continued From page 8</p> <p>directions during power outages.</p> <p>2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the firewall did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on June 12, 2019:</p> <ul style="list-style-type: none"> a. 100 Hall Firewall - the back leaf, of the double-egress cross-corridor doors, does not latch when the fire alarm system released the doors. b. Core Hall Firewall - both door leaves of the double-egress cross-corridor doors, were removed. Deficiency corrected before Construction Surveyors departed site. c. 300 Hall Firewall - the back leaf, of the double-egress cross-corridor doors, does not latch when the fire alarm system released the doors. d. 400 Hall Firewall -the double-egress cross-corridor doors have a 1/2-inch gap between their meeting stiles. <p>3. 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 June 12, 2019:</p> <ul style="list-style-type: none"> a. Kitchen -since January 2019, when the last semi-annual maintenance was performed on the commercial kitchen hood's fire suppression system, there has been no documentation of the 	C 189		

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C 189	<p>Continued From page 9</p> <p>monthly in-house/owner inspections.</p> <p>b. Kitchen - the commercial kitchen hood's suppression system does not have a nozzle correctly aimed at the deep fryer to extinguish a fire.</p> <p>c. Kitchen - the commercial kitchen hood's baffle filters are dirty and grease laden.</p> <p>4. Based on Observation, fire rated doors in the one-hour fire-resistance-rated Atrium enclosure of hazardous or Incidental areas are not being maintained in a safe and operating condition. This could affect residents, staff and visitors if smoke/fire is not contained in Room of origin. Findings on June 12, 2019: a. Core Hall Utility Room - the corridor door, part of the fire-resistance-rated enclosure, has a zero to 1/4-inch gap between the top of the door and the bottom of the doorframe's head stop.</p> <p>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 of origin. Findings on June 12, 2019: a. Entire Building - throughout the building, light fixtures were replaced, but the old holes are not firestopped as they penetrate the fire-resistance-rated ceiling assembly. b. Main Dining - there are two holes not firestopped as then penetrate the fire-resistance-rated ceiling assembly. c. Main Dining - there is a gap around the conduit on the emergency light that is not firestopped as it penetrates the fire-resistance-rated ceiling assembly. d. Kitchen - there is a gap around the conduit on electrical disconnect that is not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p>	C 189		

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C 189	<p>Continued From page 10</p> <p>e. Kitchen Office - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>f. 100 Hall Firewall Lobby Side - there is a gap at the base of the exit sign not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>g. Bedroom 201 - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>h. Core Hall Storage - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>i. Exterior Air Condition Room - most of the cable, pipe, and conduit with their firestopped sealant are starting to pull out of the fire-resistance-rated ceiling, beginning to leave an unprotected opening.</p> <p>j. Exterior Rise Room - the gypsum wallboard patches to the fire-resistance-rated ceiling have weakened and are beginning to fall out of the ceiling.</p> <p>k. Core Hall Corridor near Laundry - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>l. 400 Hall Oxygen Room - there is a cable bundle and hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>m. 400 Hall Staff Station - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>n. 300 Hall Utility Room - the exhaust fan is falling from the ceiling exposing gaps between the unit and the opening through the fire resistance rated ceiling assembly.</p> <p>o. Office Suite Between 300 and 400 Halls Corridor - the HVAC Grille is falling from the ceiling exposing gaps between the unit and the opening through the fire resistance rated ceiling assembly.</p>	C 189		

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C 189	<p>Continued From page 11</p> <p>p. Office Suite Between 300 and 400 Halls Storage - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>q. 400 Halls Activity - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>6. 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 June 12, 2019: a. Main Dining - the pair of corridor doors is equipped with a manual flush bolt on the 'inactive leaf' circumventing the requirement for these doors to be have positive latching.</p> <p>7. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on June 12, 2019: a. Entire Building - throughout the building, many new light fixtures have open junction boxes that extend beyond the fixture. b. Bedrooms 113 and 115 shared Restroom - the call system is missing its cover plate switch. c. 100 Hall Shower Room - in the toilet stall the call system is pulled out of the wall.</p> <p>e. 100 Hall Staff Station Weighting Area - an electrical power receptacle is physically broken. f. Exterior Most Porches - the ground-fault circuit-interrupter (GFCI) electrical power receptacles are missing their weather resistant covers.</p>	C 189		

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C 189	<p>Continued From page 12</p> <p>g. 300 Hall Shower Room - a light fixture is missing its globe.</p> <p>h. Bedroom 401 Bathroom - the light switch's toggle is broken and hard to operate.</p> <p>i. Bedroom 412 - a light fixture is missing it lens.</p> <p>8. Based on Observation, the 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 June 12, 2019:</p> <p>a. Main Dining - the corridor doors have mechanical kick downs holding the door open. This prevents the rapid release of the doors with a light push or pull of the doors, to close and latch.</p> <p>b. Bedroom 110 - the corridor door hits its frame and requires more than normal effect and or force close, latching the door.</p> <p>c. Bedroom 108 - the corridor door hits its frame and will not close, latching the door.</p> <p>d. 100 Hall Water Heater room in Shower Room - the door frame is rusted out at its base on one side.</p> <p>e. Entire Building - many corridor doors are being held open with furniture, trash cans, wedges etc. This prevents the rapid release of the doors with a light push or pull of the doors, to close and latch.</p> <p>f. Bedroom 307 - the corridor door does not latch into its frame when closed.</p> <p>g. Bedroom 405 - the corridor door was delaminating on both sides at the strike side bottom corner.</p> <p>h. 400 Hall Dining - the corridor door hits the floor and will not close, latching the door.</p> <p>9. Based on observations, the Building was not maintained in a safe and operating condition. The</p>	C 189		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032091	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/12/2019
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NAME OF PROVIDER OR SUPPLIER DURHAM RIDGE ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 3420 WAKE FOREST HWY DURHAM, NC 27703
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C 189	<p>Continued From page 13</p> <p>fire sprinkler heads have become obstructed. This could affect all residents, staff and visitors if the fire sprinkler heads' have their thermal elements insulated with debris causing a delay in the response to a fire.</p> <p>Findings on June 12, 2019:</p> <ul style="list-style-type: none"> a. Main Dining near HVAC Return- a fire sprinkler head is debris-loaded with lint. b. Kitchen Pantry - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. c. Activity Storage - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. d. Core Hall Clean Linen - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. e. Core Hall Laundry - the fire sprinkler heads are debris-loaded with lint. <p>10. 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 of origin.</p> <p>Findings on June 12, 2019:</p> <ul style="list-style-type: none"> a. Main Dining Storage - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. b. Kitchen Office - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. c. Bedroom 201 - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat. d. Bedroom 201 Bathroom - the fire sprinkler head is missing its escutcheon plate, exposing an 	C 189		

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C 189	<p>Continued From page 14</p> <p>opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>e. 400 Hall near Conference Room - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>f. Bedroom 404 - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>11. Based on observation in the Kitchen the ice machine drain line is on the floor receptor. The NC Plumbing Code requires that ice machine drains must not directly contact the floor or floor receptor and a minimum of 2 inches of vertical clearance must be maintained between the ice machine drain and the floor or floor drain to prevent contamination. This could affect all residents, staff and visitors who dine here if waste water backs-up and contaminates the ice.</p>	C 189		
C 191	<p>Unvented & Portable Elec. Heaters Prohibited</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances.</p> <p>(2) Unvented fuel burning room heaters and portable electric heaters are prohibited.</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>	C 191		

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C 191	Continued From page 15 This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to prevent the use of portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if heater is the ignition source of a fire. The danger increases if used by resident or combustible material is near. Findings on June 12, 2019: a. 200 Hall Front Office - a portable electric heater was found in this room.	C 191		
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 and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on June 12, 2019: a. Bedroom 101 and 103 Bathroom - the	C 199		

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C 199	Continued From page 16 required exhaust ventilation system did not work. b. 200 Hall Front Office Restroom - the required exhaust ventilation system did not work. c. Bedroom 201 Bathroom - the required exhaust ventilation system did not work. d. Bedroom 211 Bathroom - the required exhaust ventilation system did not work. e. Bedroom 214 Bathroom - the required exhaust ventilation system did not work. f. Core Hall Housekeeping - the required exhaust ventilation system did not work and chemical odor. g. Core Hall Utility Room - the required exhaust ventilation system did not work. h. 300 Hall Utility Room - the required exhaust ventilation system did not work. i. Bedroom 301 Bathroom - the required exhaust ventilation system did not work. j. Bedroom 404 Bathroom - the required exhaust ventilation system did not work. k. Bedroom 408 Bathroom - the required exhaust ventilation system did not work. .	C 199		
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