

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL036004</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/03/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ROSEWOOD ASSISTED LIVING</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>721 NORTH MARIETTA STREET GASTONIA, NC 28052</b>
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(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 Biennial Follow Up Construction Survey by Dennis Harrell on 7-3-2019.  Some deficiencies were not corrected. Further action is required.	{C 000}		
{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, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings on 7-3-2019; b. There was a 1/4 inch gap between the smoke barrier doors. j. The automatic latching hardware had been replaced with a barrel bolt manual latch. Laundry chute doors must automatically close and latch.  2. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in	{C 189}		

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

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{C 189}	Continued From page 1  one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings on 7-3-2019: b. A portion, 5 feet by 5 feet, was missing in the ceiling of the basement storage area, c. A portion, 3 feet by 6 feet, of the laundry ceiling was damaged near the laundry chute, d. Plywood patch, 20 inches by 24 inches, on the ceiling in the basement corridor, e. Plywood patch, 24 inches by 48 inches, on the ceiling in the basement corridor.  3. Based on observation, the facility failed to be maintained in a safe condition because of exit signs not working properly. Malfunctioning exit signs could delay or prevent an evacuation in an emergency. Findings on 7-3-2019: a. The exit sign in the basement near the laundry did not work on battery when tested.	{C 189}		
{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	{C 199}		

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{C 199}	Continued From page 2  facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: Based on observation the facility failed to maintain required exhaust in a working condition. Finding on 7-3-2019; There was still no exhaust or window provided in the storage room with the tub.	{C 199}		