

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL044022</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/10/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CHESTNUT PARK RETIREMENT</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>84 CHESTNUT PARK DRIVE</b> <b>WAYNESVILLE, NC 28786</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 7-10-2019.  Some deficiencies were not corrected. Further action is required.	{C 000}		
{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 7-10-2019: a. Back Corridor - there are many items stored along the entire Back Corridor, obstructing the required six feet width corridor to 48 inches. Items included 3 full trash bags and 9 cardboard boxes b. The rear exit corridor was obstructed with 2 ladders, 4 storage boxes, tools and brooms.	{C 150}		
{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	{C 183}		

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

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{C 183}	Continued From page 1  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. Finding on 7-10-2019: The documentation of all of the portable fire extinguisher's monthly inspections stopped in May 2018.	{C 183}		
{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: 3. Based on observations, the Building fire safety components were not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on 7-10-2019: a. Bedroom 2 - there is a gap around a cable not firestopped as it penetrates the corridor smoke partition assembly. c. Back Housekeeping Room- there is a gap at	{C 189}		

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{C 189}	Continued From page 2  the base of the exhaust fan not firestopped as it penetrates the fire-resistance-rated ceiling assembly.	{C 189}		