

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL036004 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____ | (X3) DATE SURVEY COMPLETED R 09/30/2019 |
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| NAME OF PROVIDER OR SUPPLIER ROSEWOOD ASSISTED LIVING | STREET ADDRESS, CITY, STATE, ZIP CODE 721 NORTH MARIETTA STREET GASTONIA, NC 28052 |
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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 |
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{C 000} Initial Comments

Report of Biennial Follow Up Construction Survey by Dennis Harrell on 9-30-2019.

Some deficiencies were still not corrected. Further action is required.

{C 000}

C189(5)
The contractor will add a latch to the chute door to assure the door closes and latch. This will be done and completed by Oct. 31st.

11/5/19
to 3/1/19
(SBJ)

{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, 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.
Finding on 9-30-2019;

j. The barrel bolt manual latch had been removed so the laundry chute door could not latch at all. Laundry chute doors must automatically close and latch. Additionally, the laundry chute door in the basement had sagged and could no longer latch when closed.

2. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised

{C 189}

The contractor will go through the basement and check all walls and ceiling and repair the locations with one hour fire rated sealant. All work will be done by Oct. 31st to be in compliance with the Rule.

11/5/19
to 3/1/19
(SBJ)

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Shannon B. Jamenson

TITLE
Administrator 10/15/19
(X6) DATE
If continuation sheet 1 of 2

sent an email to Dennis Harrell for extension on 10/31/19
SBJamenson

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