

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL036023	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/14/2019
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NAME OF PROVIDER OR SUPPLIER TERRACE RIDGE ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 1251 E HUDSON BLVD GASTONIA, NC 28054
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on November 14, 2019.</p> <p>Records indicate that this facility was licensed on November 26, 1997 is currently licensed for 74 residents. A 14 bed addition was approved on January 16, 2009. Therefore, we are requiring that this facility meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1996 and 2006 editions of the North Carolina State Building Code Volume I - Institutional Occupancy (Group I).</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	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the required fire-resistance-rated construction required by NC State Building Code. This could affect all occupants if fire is not contained in the room of origin. Findings on November 14, 2019: a. 400 Hall Storage - the 350 plus square foot room is storing combustibles and has a 20 minoute rated door.	C 101		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide tubs 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. Findings on November 14, 2019: a. 400 Hall Spa - the tub does not have a hand grip (grab bar).	C 133		
C 185	Fire Safety-Rehearsals on Each Shift	C 185		

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C 185	<p>Continued From page 2</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(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.</p> <p>(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 short description of what the rehearsal involved.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> Based on Record review and interview with Executive Director and Maintenance Director, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. <p>Findings on November 13, 2019:</p> <ol style="list-style-type: none"> In the 3rd quarter for the last 12 months, no rehearsal occurred during 3rd shift. 	C 185		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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.</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 189		

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C 189	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 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 November 14, 2019: <ol style="list-style-type: none"> a. Corridor near Bedroom 302 - the self-contained emergency light did not illuminate on backup power when the test button is pushed. b. Kitchen - a headlight on the self-contained emergency light did not illuminate on backup power when the test button is pushed. 2. 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 November 14, 2019: <ol style="list-style-type: none"> a. Kitchen - the commercial kitchen hood's suppression system does not have a nozzle correctly aimed at the deep fryer to extinguish a fire. Deficiency corrected before Construction Surveyors departed site. 3. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on November 14, 2019: <ol style="list-style-type: none"> a. Bedroom 318 Bathroom - the ground-fault circuit-interrupter (GFCI) electrical power receptacle does not trip when its test button is pushed or when tested with a ground fault receptacle tester & circuit analyzer. 	C 189		

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C 189	<p>Continued From page 4</p> <p>4. 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 November 14, 2019: a. Kitchen - there is a gap at the base of the exit sign not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>5. 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 November 14, 2019: a. Activity Room - the pair of corridor doors has an inactive leaf with an automatic flush bolt that did not latch to its frame; therefore, the active leaf could not latch to a secured inactive leaf.</p> <p>6. 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. Findings on November 14, 2019: a. Clean Linen in Bulk Laundry - the escutcheon plate on the fire sprinkler has dropped from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>7. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin.</p> <p>Findings on November 14, 2019:</p> <ul style="list-style-type: none"> a. 100 Hall Day Room - a corridor door has a wedge holding the door open and a med cart is blocking the door from closing. b. 200 Hall Day Room - a corridor door has a wedge holding the door open. c. Bedroom 201 - the corridor door has a wedge holding the door open. d. 400 Hall Storage Room - the corridor door has a wedge holding the door open 	C 189		