

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL060165</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/15/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SUNRISE ON PROVIDENCE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5114 PROVIDENCE ROAD CHARLOTTE, NC 28226</b>
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C 000	<p>Initial Comments</p> <p>Report of Construction Section Biennial Survey by Dennis Harrell and Ed Miller on 1-15-2020:</p> <p>Records indicate that this facility was first licensed on 8-20-1998. The facility is currently licensed for 95 residents total with 25 in a Special Care Unit. Therefore, we are requiring that this facility meet the 1996 Rules for Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds and the 1996 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I).</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</p> <p>The physical plant requirements for each adult care home shall be applied as follows:</p> <p>(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> <p>This Rule is not met as evidenced by: Based on observation, this facility failed to meet the NC State Building Code requirements for</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>Special Locking (magnetic locks) on the exit doors. The Code requires an on/off emergency release switch that will unlock the door within 3 feet of each locked exit door. Findings on 1-15-2020:</p> <p>c. The emergency release switch at the sliding smoke wall on the second floor failed to open the path through the wall.</p> <p>a. The emergency release switch located at the door from the elevator lobby into Special Care was a momentary switch. Momentary switches are not of the on/off type. This door did not appear to be a required exit, however it is marked as an exit by an exit sign.</p> <p>Based on observation, this facility's secured courtyard was not equipped with all of the components necessary to ensure resident safety.</p> <p>b. The courtyard is not large enough to serve as an area of refuge in a fire (enough square footage more than 50 feet from the building). There is not a release switch located at the gate which does not rely on electronics or relays to unlock the gate. The keypad is the only method available.</p>	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	Continued From page 2  (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: Based on observation, the hand grip provided at the shower in room 226 was broken.	C 133		
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: Based on observation, the corridor was not maintained free of obstructions. At least 6 feet of clear width must be maintained in exit corridors. Findings on 1-15-2020: a. There was a scale stored in the corridor near room 114 reducing the clear width to about 3 feet. b. There were chairs and a table in the corridor near room 112 reducing the clear width to about 4 feet. c. There were carts and kitchen storage in the corridor near the kitchen reducing the clear width to about 3 feet. Note; This deficiency was corrected during the survey.	C 150		
C 166	Housekeeping-Maintained Free of Hazards  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and	C 166		

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C 166	<p>Continued From page 3</p> <p>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> <ol style="list-style-type: none"> <li>1. Based on observation, the facility was not maintained in free of obstructions and hazards because of combustible storage in stairways. Storage is not permitted in a stairway. Findings on 1-15-2020;               <ol style="list-style-type: none"> <li>a. Stairway A was obstructed with combustible storage including 4 boxes of speakers, 19 boxes of filters, and a 4 feet long countertop.</li> <li>b. Large artificial plant stored on a landing in stairway D-1. Note; This deficiency was corrected during the survey.</li> </ol> </li> <li>2. Based on observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Finding on 1-15-2020: A portable medical oxygen cylinder was stored in no container or rack in room 133.</li> <li>3. Based on observation, electrical plates were missing exposing energized wires and parts. Exposed wiring is a hazard. Findings on 1-15-2020;               <ol style="list-style-type: none"> <li>a. A floor receptacle cover was missing in the 1st floor liivng room</li> <li>b. A junction box plate was missing in the electical room by room 209.</li> <li>c. An exit sign in the corridor near room 24 was hanging by the exposed wires.</li> </ol> </li> </ol>	C 166		

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C 166	<p>Continued From page 4</p> <p>4. Based on observation, the facility was not maintained in a safe condition because of combustible storage in a furnace closet. Storing combustibles in a furnace closet increases the possibility of a fire. Findings on 1-15-2020; The furnace closet by the Activities office was stacked full of combustible storage.</p> <p>5. Based on observation, exterior exit paths were not maintained uncluttered and free of obstructions. Finding on 1-15-2020; a. One exit door from Special Care would not open fully for egress because it was blocked with a piece of siding trim. Also, the trim on the sidewalk presented a trip and fall hazard. Note; This deficiency was corrected during the survey. b. The exit path from the Special Care courtyard to the exit sidewalk outside the courtyard was wet and muddy and was provided omly with 1 foot square walking stones that would not help and might hinder the movement of walkers and wheelchairs. c. There was a tarp tied to the fence near the courtyard gate as a shelter that hung down to less than 5 feet above the ground directly in the pathway to the exit gate.</p> <p>6. Based on observation, an extension cord was being used in place of permanent wiring to a refrigerator in Special Care. Extension cords are intended for temporary use only.</p> <p>7. Based on observation a telephone cord was run through a doorway from the RC office to the corridor. Cords in doorways present a trip and fall hazard.</p>	C 166		

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C 188	Continued From page 5	C 188		
C 188	<p>Electrical Outlets in Wet Locations</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observation, the GFCI type receptacle in the kitchen area of room 226 would not reset after being tested. GFCI type receptacles that don't work properly present the hazard of serious electrical shock or electrocution.</p>	C 188		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised in many locations. Holes and penetrations that are not sealed with materials approved for use in 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.</p>	C 189		

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C 189	<p>Continued From page 6</p> <p>Note: It was assumed at the tme of survey that the suspended ceilings were a fire resistant part of the floor/ceiling assemblies.</p> <p>Findings on 1-15-2020:</p> <ul style="list-style-type: none"> <li>a. Unsealed penetration in the ceiling of the Executive Director's office,</li> <li>b. Several holes in the wall between the equipment room and the adjacent foyer,</li> <li>c. Hole, 12 inches by 20 inches, in the wall in the janitor's closet on the 2nd floor,</li> <li>d. Hole at the sprinkler head in the corridor at the exit to stairway D-2,</li> <li>e. Hole at the sprinkler support in the corridor in stairway D-2,</li> <li>f. Sprinkler escutcheon missing in the Business office closet,</li> <li>g. Hole, 20 inches by 24 inches, in the ceiling of the 1st floor living room,</li> <li>h. Ceiling access panel found open in the janitor's closet at room 128,</li> <li>i. Speaker falling away from the ceiling in the corridor at room 131.</li> <li>j. Sprinkler escutcheon missing in the corridor at room 131.</li> <li>k. Hole in the wall in the mechanical closet near room 125,</li> <li>l. Unfinished ceiling gypsum patch at a sprinkler head in stairway C, 1st floor,</li> <li>m. There was an unrated plastic access door on the ceiling in the copy room,</li> <li>n. Hole, 12 inches by 12 inches, in the wall in the mechanical room on the 1st floor near the ED office,</li> <li>o. Unrated orange foam had been used to seal a hole in the mechanical room on the 1st floor near the ED office,</li> <li>p. Several small holes in the walls and ceiling in the mechanical room on the 1st floor near the ED office,</li> </ul>	C 189		

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C 189	<p>Continued From page 7</p> <p>q. Sprinkler escutcheon not fitted to the ceiling in the mechanical room on the 1st floor near the ED office,</p> <p>r. Unsealed penetration at a pipe in the 1st floor stairway D-1,</p> <p>s. Ceiling access panel not closing properly near the resident's mail area,</p> <p>t. Holes in the walls and ceiling of the mechanical room on the employee hall,</p> <p>u. Unsealed penetration in exit D-T,</p> <p>v. Hole in the wall in the RC office in Special Care.</p> <p>2. 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 (gaps less than 1/4 inch) 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.</p> <p>Findings on 1-15-2020;</p> <p>a. The 1st floor door to stairway A does automatically latch when closed.</p> <p>b. The 1.5 hour fire rated door to the maintenance area drags the floor and does not automatically close and latch.</p> <p>c. The door from the kitchen to the dining room does not fit the opening properly to be resistant to the passage of smoke. Note; The dining room is open to the corridor.</p> <p>d. The door to room 112 does not fit the opening properly to be resistant to the passage of smoke.</p> <p>e. The door to room 113 does not fit the opening properly to be resistant to the passage of smoke.</p> <p>f. The door to room 114 does not fit the opening properly to be resistant to the passage of smoke.</p> <p>g. The door to the restroom in Special Care does not fit the opening properly to be resistant to the passage of smoke.</p>	C 189		



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C 189	<p>Continued From page 8</p> <p>h. There were holes at the latchset through the door to the housekeeping closet in Special Care.</p> <p>4. Based on observation, the facility was not maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability of the fire sprinkler system to extinguish a fire. Findings on 1-15-2020;</p> <p>a. Boxes had been stacked to within 6 inches of the ceiling in the kitchen storage room.</p> <p>b. Items had been stacked to within 4 inches of the ceiling in the housekeeping supply closet.</p> <p>c. Items had been stacked to the ceiling in the maintenance office.</p> <p>5. Based on observation, there was no documentation of the required in house/owner's monthly inspections since October provided on the inspection tag at the range hood fire suppression system. Range hood fire suppression systems must be inspected monthly and the inspections must be documented somewhere such as on the tag provided at the system pull.</p> <p>6. Based on observation, plumbing equipment drain lines were not maintained in a safe condition. Ice machine drain lines that are not maintained at least 2 inches above the floor or floor drain, as required by Code, could cause the ice to become contaminated. Finding on 1-15-2020; The ice machine drain lines (2) extended into the floor drain.</p>	C 189		

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C 199	Continued From page 9	C 199		
C 199	<p>Exhaust Ventilation</p> <p><b>SECTION .0300 - PHYSICAL PLANT</b> <b>10A NCAC 13F .0311 OTHER REQUIREMENTS</b></p> <p>(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:</p> <ol style="list-style-type: none"> <li>(1) soiled linen storage;</li> <li>(2) soil utility room;</li> <li>(3) bathrooms and toilet rooms;</li> <li>(4) housekeeping closets; and</li> <li>(5) laundry area.</li> </ol> <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> <p>This Rule is not met as evidenced by: Based on observation the facility failed to maintain required exhaust in a working condition. Findings on 1-15-2020;</p> <ol style="list-style-type: none"> <li>a. The exhaust provided was not working in the laundry on the 2nd floor.</li> <li>b. The exhaust provided was not working in the restroom near room 210.</li> <li>c. The exhaust provided was not working in the laundry in Special Care.</li> </ol>	C 199		