

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL001149	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/09/2023
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NAME OF PROVIDER OR SUPPLIER MAKING VISIONS COME TRUE ASSISTED LIVI	STREET ADDRESS, CITY, STATE, ZIP CODE 625 LANE STREET BURLINGTON, NC 27217
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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	<p>Initial Comments</p> <p>Report of Construction Section Biennial Survey by Suzanna Fay conducted on August 9, 2023.</p> <p>Records indicate this facility was first licensed as a Home for the Aged serving 12 ambulatory residents on March 26, 1993. Therefore, the facility must meet the 1991 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes and the 1991 NC State Building Code(s) section 409.1 for a Group I-Institutional Unrestrained Occupancy.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
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: 1. Based on observation the electrical outlets in all wet locations such as sinks, bathrooms and outside of building are not equipped with ground fault interrupters. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection.</p> <p>Findings on August 9, 2023: a. Exit by Room 6 - the exterior outlet has tripped and will not reset when the reset button is pressed.</p>	C 188		

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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	C 189		
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> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be effected if the equipment failed to alert the occupants in case of a fire.</p> <p>Findings on August 9, 2023:</p> <p>a. The vendor that monitors the fire alarm was having problems with their lines and did not think they would be able to contact the fire department if the system was tested. Therefore, the system was not tested. Staff were notified to call 911 directly in the event of a fire or other emergency. A follow up call to the provider on 8/15/23 revealed that the issue had been corrected.</p> <p>2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin.</p> <p>Findings on August 9, 2023:</p>	C 189		

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C 189	<p>Continued From page 2</p> <p>a. The left door of the cross corridor doors could not be pulled loose from the magnet manually to determine if the doors closed. Also, the doors could not be verified to release upon activation of the fire alarm due to technical issues with the monitoring company.</p> <p>3. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin.</p> <p>Findings on August 9, 2023:</p> <p>a. Staff Bedroom - there is a 1" diameter hole in the back corner of the room.</p> <p>b. Second Half Bath - the escutcheon ring on the sprinkler head has dropped leaving a gap in the fire resistant rated ceiling. This was corrected at the time of survey.</p> <p>c. There is a small hole in the ceiling at the base of the exit sign outside of the Half Baths.</p> <p>d. Electrical Room - there is a small unsealed cable penetration over the fire alarm panels.</p> <p>e. There is a small hole in the ceiling at the base of the exit sign outside of Room 6.</p> <p>f. The escutcheon ring on the sprinkler head outside of Dining has dropped leaving a gap in the fire resistant rated ceiling.</p> <p>4. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin.</p>	C 189		

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C 189	Continued From page 3 Findings on August 9, 2023: a. Living Room - there is a wedge in place to hold the Living Room door open. b. Kitchen - there is a wedge in the corridor door and a wedge holding open the Pantry door.	C 189		