

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092186	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 03/21/2024
NAME OF PROVIDER OR SUPPLIER FOUNDATION SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 1437 AVERSBORO ROAD GARNER, NC 27529		
(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 a Biennial Construction Survey by Suzanna Fay, Jonathan Gamsey and Melissa Hersh conducted on March 21, 2024. Records indicate that the Facility was licensed on October 22, 2021 for One-Hundred Twenty-Six (126) Resident Beds. Based on the above information, the facility is required to meet the 2005 Rules for Adult Care Homes of Seven or More Beds and the 2018 North Carolina State Building Code, Institutional (I-2) Occupancy. Deficiencies were noted which require a Plan of Correction.	C 000		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the walls, ceilings and floors were not kept in good repair. Findings on March 21, 2024: a. Room 301 - the patching around the sprinkler head is not finished. b. Room 309 - the paint is flaking at the corridor wall/ceiling juncture in the bathroom. c. Third Floor - the carpet is unraveling at the	C 164		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 164	Continued From page 1 seam outside of the Assisted Bathroom creating a trip hazard. d. First Floor - the carpet is unraveling at the seam outside of the Sitting Room creating a trip hazard.	C 164		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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. (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. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Review of records revealed that the facility was not conducting quarterly fire rehearsals on each shift. The facility was not including in the records a short description of what the rehearsal involved. Findings on March 21, 2024: a. There were no records of fire rehearsals conducted during the second quarter of 2023. b. There was not a fire rehearsal conducted on the third shift of 2023. c. There was not a fire rehearsal conducted on the second or third shift of the fourth quarter of 2023.	C 185		

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C 185	Continued From page 2 d. There was not a short description provided of what the rehearsal involved.	C 185		
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 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 affected if the fire resistant rated doors do not completely close to help limit the spread of smoke and/or fire to the area of origin. Findings on March 21, 2024: a. The roll-down fire door at the second floor balcony did not automatically close when the fire alarm was activated. 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 affected if doors with closers do not automatically close and latch to help limit the spread of smoke or fire to the area of origin.	C 189		

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C 189	<p>Continued From page 3</p> <p>Findings on March 21, 2024:</p> <p>a. Beauty Salon - the door did not automatically close and latch.</p> <p>3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire 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 March 21, 2024:</p> <p>a. Room 308 - the door does not latch when closed.</p> <p>b. Room 118 - the door does not latch when closed.</p> <p>c. Room 108 - the weatherstripping around the door is too thick to allow the door to close without excessive force.</p> <p>4. 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 or walls could allow fire and smoke to spread beyond the area of origin.</p> <p>Findings on March 21, 2024:</p> <p>a. Room 311 - the escutcheon ring on the sprinkler head near the entry has dropped leaving a gap in the fire resistant rated ceiling.</p> <p>b. Third Floor Sitting Room - there is a small gap at the edge of the sprinkler head escutcheon ring leaving a hole in the fire resistant rated ceiling.</p> <p>c. Third Floor Mechanical off of Residential Laundry - the escutcheon ring on the sprinkler head has dropped leaving a gap in the fire resistant rated ceiling.</p> <p>d. Second Floor Storage - the escutcheon ring</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>on the back sprinkler head has dropped. This was corrected at the time of survey.</p> <p>e. Second Floor Soiled Utility - the escutcheon ring on the sprinkler head has dropped leaving a gap in the fire resistant rated ceiling.</p> <p>f. Second Floor Storage off of Residential Laundry - the escutcheon ring on the sprinkler head has dropped leaving a gap in the fire resistant rated ceiling.</p> <p>g. Service Hall near exit - 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>h. First Floor Mechanical Room - there is a small unsealed cable penetration on the right wall and there are gaps in the ceiling around the edges of the Honeywell panel.</p> <p>5. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops.</p> <p>Findings on March 21, 2024:</p> <p>a. Dining - there is a half inch gap between the pair of double doors when closed.</p> <p>6. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin.</p> <p>Findings on March 21, 2024:</p> <p>a. Second Floor Resident Kitchen - the door is held open using a wedged device.</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>7. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition.</p> <p>Findings on March 21, 2024: a. Courtyard - it appears that one of the third floor vent covers has fallen out over the Trash Room.</p> <p>8. Observations revealed that the plumbing equipment was not maintained in a safe and operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility.</p> <p>Findings on March 21, 2024: a. First Floor First Guest Toilet - the toilet is not secure to the floor.</p>	C 189		