

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL074046</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/07/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ALPHA CARE ONE ASSISTED LIVING</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2060 WEST FIFTH STREET GREENVILLE, NC 27835</b>
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Suzanna Fay conducted on March 7, 2024.</p> <p>Records indicate this facility was first licensed on April 16, 1984. The facility is currently licensed for 120 beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1978 (Revision 5) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1984 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.</p> <p>Deficiencies were noted. A Plan of Correction is required.</p>	C 000		
C 111	<p>Must Have Current San. &amp; Fire Safety Reports</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION( f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have current fire and building safety inspection reports maintained in the home and available for review.</p> <p>Findings on March 7, 2024: a. A copy of the Fire Alarm Inspection Report was not available for review.</p>	C 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 160	Continued From page 1	C 160		
C 160	<p>Outside Premises-Clean, Safe</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;</p> <p>This Rule is not met as evidenced by: 1. Observations revealed that the outside grounds were not maintained in a clean and safe condition.</p> <p>Findings on March 7, 2024: a. Exit by Activity Room - there is a short section of exterior siding missing near the top of the gable above the exit.</p>	C 160		
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(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.</p> <p>This Rule is not met as evidenced by: 1. Observations revealed that the ceilings were not kept clean and in good repair.</p>	C 164		

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C 164	Continued From page 2  Findings on March 7, 2024: a. Laundry and Room 119 - there is a heavy accumulation of dust on the exhaust fan grilles. b. Room 110 - there is a ceiling patch from a prior leak along the corridor wall. There is a 6" x 12" brown water stain in the patched area and there is a 4" diameter black mildew spot in the center of the water stain. c. Room 335 Shared Toilet - there is a dark brown stain in the corner of the ceiling over the toilet.	C 164		
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 orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Observations revealed that the facility is not maintained free of all hazards. Loose rails and broken brackets can cause injury from a slip or fall if the handrail failed to support the resident or staff member.  Findings on March 7, 2024: a. The screws are backing out on the bracket on the handrail by Room 203 making the rail loose.  2. Based on observation the facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without	C 166		

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C 166	<p>Continued From page 3</p> <p>any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility.</p> <p>Findings on March 7, 2024:</p> <p>a. Room 204, Oxygen Storage - there are three loose bottles of oxygen resting on the floor. There are eight tall oxygen bottles sitting unsecured in a shallow plastic crate at the left wall and seven tall oxygen bottles sitting unsecured in a shallow plastic crate at the back wall.</p> <p>3. Observations revealed that the home was not free of all obstructions and hazards. Exit doors that are not easily operable can prevent residents, staff and visitors from exiting in a safe and timely manner during a fire or other emergency.</p> <p>Findings on March 7, 2024:</p> <p>a. Both of the exit doors from Dining to the exterior smoking areas were stuck and required excessive force to open.</p>	C 166		
C 175	<p>Bedroom Furnishings-Clean Towel, Towel Bar</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(b) Each bedroom shall have the following furnishings in good repair and clean for each resident:</p> <p>(7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p>	C 175		

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C 175	Continued From page 4  1. Observations revealed that the bedrooms or adjoining bathrooms did not have a towel bar for each resident.  Findings on March 7, 2024: a. There was a pattern of each shared bathroom serving four residents having just two towel bars in the bathroom and none in the bedrooms.	C 175		
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 and latch to help limit the spread of smoke and/or fire to the area of origin.  Findings on March 7, 2024: a. The right hand door at the cross corridor doors by Room 306 did not close and latch when released by the fire alarm. b. The overhead latch plate is loose on the right hand door of the cross corridor doors by Room 225 and the door would not open unless manually	C 189		

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C 189	<p>Continued From page 5</p> <p>pressing the latch.</p> <p>c. The left hand door of the cross corridor doors by Room 208 did not completely latch when released by the fire alarm.</p> <p>d. The right hand door of the fire door at Room 128 rubs on the frame and does not close completely.</p> <p>e. The right hand door of the fire door at Room 107 did not close when the fire alarm was activated due to a depression in the floor and the left hand door does not completely latch.</p> <p>2. Observations revealed that the building was not maintained in a safe and operating condition.</p> <p>Findings on March 7, 2024:</p> <p>a. There are dozens of shingles missing along the roof and roof ridge shingles are loose in places.</p> <p>3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage.</p> <p>Findings on March 7, 2024:</p> <p>a. Emergency light #7 outside of Room 212 did not illuminate on test.</p> <p>b. Dining - emergency light #14 did not illuminate on test.</p> <p>4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.</p> <p>Findings on March 7, 2024:</p>	C 189		

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C 189	<p>Continued From page 6</p> <p>a. The exit sign over the front entry door did not illuminate on test.</p> <p>b. The exit sign at exit 38 by Room 137 did not illuminate on test.</p> <p>c. The exit sign at the fire door by Room 106 did not illuminate on test.</p> <p>d. Dining - the exit sign over the door to the resident smoking area did not illuminate on test.</p> <p>5. 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 7, 2024:</p> <p>a. Shared Toilet with Room 137 - the toilet is not secure to the floor.</p> <p>b. Shared Toilet with Room 103 - the toilet is not secure to the floor.</p> <p>c. Shared Toilet with Room 338 - the toilet is not secure to the floor.</p> <p>6. 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 7, 2024:</p> <p>a. Room 133 - the door does not latch when closed.</p> <p>b. Room 131 - the bed was overlapping the door frame preventing the door from closing. This was corrected at the time of survey.</p> <p>c. Room 104 - the door does not latch when closed.</p> <p>d. Room 112 - the bed sticks out beyond the</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>door frame preventing the door from closing.</p> <p>e. Room 205 - the door does not latch when closed.</p> <p>f. Room 337 - the door does not latch when closed.</p> <p>g. Room 336 - the hinge is loose causing the door to drag on the frame requiring excessive force to close.</p> <p>h. Room 307 - the door does not latch when closed.</p> <p>7. 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 affected if the equipment failed to alert the occupants in case of a fire.</p> <p>Findings on March 7, 2024:</p> <p>a. There is a heavy layer of dust on the smoke detector outside of Room 114.</p> <p>8. 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 7, 2024:</p> <p>a. Room 104 - there is a gap approximately 3/8" wide along the top right of the door between the door and frame.</p> <p>9. Observations revealed that the plumbing is not maintained in a safe and operating condition.</p> <p>Findings on March 7, 2024:</p> <p>a. Storage off of Bath 108 - there is a 12" puddle of water at the door behind the bathroom sink which appears to be a leak.</p>	C 189		

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C 189	<p>Continued From page 8</p> <p>b. Shared Bath between Room 206 and 208 - the toilet is not flushing and there is a strong odor in the room.</p> <p>10. Based on observation there is a failure to install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping with a minimum 2" air gap could affect all occupants of the facility if the domestic water supply became contaminated.</p> <p>Findings on March 7, 2024:</p> <p>a. Kitchen - the drain line for the icemaker is less than 1" above the floor and drain opening.</p> <p>11. 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 March 7, 2024:</p> <p>a. Business Office - there is one unsealed cable penetration at the window wall.</p> <p>b. Room 331 Electrical - there is an old leak that has caused the finish to fall off and compromises the fire resistant ceiling rating.</p> <p>c. Room 310 Water Heater - the ceiling and fire caulk around the conduit above the overflow tank is damaged leaving a gap around the conduit penetration.</p> <p>12. 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 walls could allow fire and smoke to spread beyond the area of origin.</p> <p>Findings on March 7, 2024:</p>	C 189		

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C 189	Continued From page 9  a. Attic outside of Room 224 - there is a cable sleeve not sealed as it penetrates the fire wall. b. Attic outside of Room 224 - there is 24" W x 48" H hole cut into the smoke partition wall above the lobby.	C 189		
C 195	Hot Water System  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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. Observations revealed that the hot water temperature was not maintained between 100 degrees F and 116 degrees F at all fixtures used by residents.  Findings on March 7, 2024: a. Beauty Salon - the water temperature at the hair washing sink was 120 degrees F.	C 195		
C 199	Exhaust Ventilation  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 199		

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C 199	<p>Continued From page 10</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> <ul 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> </ul> <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> <ol style="list-style-type: none"> <li>1. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors.</li> </ol> <p>Findings on March 7, 2024:</p> <ul style="list-style-type: none"> <li>a. Room 113 Shared Toilet - the exhaust fan is not working.</li> <li>b. Bath 108 - the exhaust fan is not working.</li> <li>c. Room 323, Women's Bath - the exhaust fan is not working.</li> <li>d. Room 335 Shared Toilet - the exhaust fan is not working.</li> <li>e. Room 330 Bath - the exhaust fan is not working.</li> <li>f. Room 308 Bath - the exhaust fan is not working.</li> </ul>	C 199		