

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL049004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 11/21/2024
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NAME OF PROVIDER OR SUPPLIER

ROSEWOOD ASSISTED LIVING

STREET ADDRESS, CITY, STATE, ZIP CODE

**3134 HARMONY HIGHWAY
HARMONY, NC 28634**

(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 Construction Section Biennial Survey by Tod Hancock, conducted on November 21, 2024. Records indicate this facility was first licensed on October 1, 1964, as a Home for the Aged serving Fifty-Four (54) Resident Beds. Based on this information, this facility is required to meet the 1971 Minimum and Desired Standards and Regulations for the Licensing of Homes for the Aged and Infirm, and the applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds. Deficiencies were cited that require a Plan of Correction.	C 000		
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 the facility is not maintaining the electrical components in a safe condition. Findings on November 21, 2024: a. Breezeway-Smoking Area- There are exposed conductors at the light fixture box. b. Right Rear Exit Foyer- The fluorescent light is	C 189	Facility is in the process of replacing both lights outside breezeway maintenance to inspect faulty monthly for exposed wiring	12/25/24

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

[Signature]

TITLE

Administrator

(X6) DATE

12/28/24

Division of Health Service Regulation

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C 189	Continued From page 1 missing its cover. 2. Observations revealed that the plumbing equipment was not maintained in a safe operating condition. Findings on November 21, 2024: a. Kitchen- The ice machine drain does not have a 2" air gap 3. Based on observation, the buildings' emergency equipment is not maintained in a safe operating condition. This could affect all if they could not promptly find their way to the exit during an emergency. Findings on November 21, 2024: a. Breezeway Exit- The Emergency light did not illuminate when tested 4. Based on observation the facility failed to maintain the fire safety systems in a safe operating condition. This could endanger all occupants by delaying the signaling of first responders in an emergency. Findings on November 21, 2024: a. Kitchen Pantry- The smoke detector is not securely attached to its base. 5. Observations revealed that the mechanical equipment was not maintained in a safe and operating manner. Exposed heating elements on baseboard radiators can cause an injury or fire if not protected. Findings on November 21, 2024: a. Back Hall Shower- The protective cover for the baseboard radiator is not present. 6. Based on observation the facility is not maintaining its handgrips in a safe manner. This could cause unnecessary harm to residents and staff.	C 189	Light cover to be replaced & others checked monthly to make sure covers are in place Plumber to access & fix drain. Kitchen staff to check monthly Maintenance to check & replace bulbs & check exit lights monthly Maintenance to repair & check smoke detector * We are currently looking for someone to repair this Maintenance to repair & check monthly for safety	1/25/25 1/25/25 1/25/25 need more time 1/25/25

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PRINTED: 12/13/2024
FORM APPROVE

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C 189	Continued From page 2 Findings on November 21, 2024: a. Main Hall-400 Hall- The handrail is loose at several locations along the right side. b. Between Room 17 & 18- The handrail is loose. 7. Based on interviews with Staff, review of records and observation, the facility has failed to maintain the fire safety components in a safe and operating condition. This could allow a fire to spread at a faster rate. Findings on November 21, 2024: a. Kitchen- A new cook stove has been installed under the existing hood. The existing fire suppression system is not adequate to provide suppression across the length of the stove.	C 189	Spoke 2 FCS who can not replace. They recommended someone to do this waiting for them to schedule a time to do this	need more time