

PRINTED: 01/13/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060136	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 12/30/2015
NAME OF PROVIDER OR SUPPLIER LAWYERS GLEN RETIREMENT LIVING CENTE		STREET ADDRESS, CITY, STATE, ZIP CODE 10830 LAWYERS ROAD CHARLOTTE, NC 28227		
(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 Follow-up Survey by Frank Strickland 12/30/2015: There are cited deficiencies that require corrective action and a new Plan of Correction is required.	(C 000)		
(C 104)	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 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: II. The facility has failed to keep furnishings in good repair. Not providing furnishings that aid residents in mobility and stability directly effects those residents requiring use of such items. A. Findings on 09/09/2015: 1. 100 Hall - There are sections of the hall where wall mounted handrails are not installed.	(C 104)		
(C 199)	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of	(C 199)	Installation of handrails completed on 1/14/15 pictures attached on 1/20/15 unattached. complete.	1/14/15

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

NF-0022

If continuation sheet 1 of 2

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{C 189}	Continued From page 1 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: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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: I. Based on observation the facility has not provided exhaust ventilation. This could effect the occupants of the facility by not exhausting from some areas undesirable odors or fumes. A. Findings on 09/09/2015: d. Main Laundry - There is a bird nest in the exhaust fan between the fan blades and the grille. The exhaust fan is not operable.	{C 189}	<i>Fan has been repaired.</i>	<i>1/25/15</i>