STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL051048	A. BUILDING: **01** B. WING _____	**11/10/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GABRIEL MANOR ASSISTED LIVING CENTER	**84 JOHNSON ESTATE RD CLAYTON, NC 27520**

(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 Construction Section Biennial Survey conducted on 11/10/2016 by Billy S. Bryant. Records indicate this facility was first licensed on 04/30/2013. The facility is currently licensed for 77 Beds including a 48 Bed Special Care Unit. Therefore the facility was surveyed for conformance with the the 2009 Edition of the North Carolina Building Code(s), Institutional Occupancy and the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	C 000		
C 111	Must Have Current San. & Fire Safety Reports 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. This Rule is not met as evidenced by: 1. The facility failed to have available for review and maintained on site current (within the calendar year) required inspection reports. Finding on 11/10/2016: a. A current (within the calendar year) fire marshal's inspection report was not available for review by the surveyor at the the time of the biennial construction survey. b. An annual inspection report for the fire sprinkler system was not available for review by the surveyor.	C 111		

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C 166	Continued From page 1	C 166		
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. Based on observation the facility was not maintained free from hazards due to the improper storage of a pressurized gas filled bottle. Pressurized gas bottles that are not stored properly or otherwise restrained from falling or being knocked over may present a danger to the occupants of the facility Finding on 11/10/2016: a. Activity Office - A large helium filled gas bottle was store in the corner of the room standing upright without any means to prevent it from falling or being knocked over. 2. Based on observation the facility was not maintained free from hazards due to the improper storage of a chemicals. Finding on 11/10/2016: a. Kitchen - There are chemicals stored in the small office and the room is not provided with an exhaust system to vent air to the exterior of the building.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift	C 185		

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C 185	Continued From page 2 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. Based on an interview with the facility administrator records of the required fire plan rehearsals were not available for review by the surveyor at the time of the biennial construction survey. Finding on 11/10/2016: a. There were no records of the fire plan rehearsals required to be conducted by each shift on a quarterly basis.	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)	C 189		

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C 189	Continued From page 3 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility was not maintained in a safe manner by a failure to maintain electrical emergency/safety lighting equipment in operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Finding on 11/10/2016: a. S.C.U. - The wall mounted emergency light adjacent to room #224 room did not illuminate on battery power when tested. 2. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner. Penetrations or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Finding on 11/10/2016: a. Data Room - There are two PVC sleeves for data cables that penetrate the fire resistant ceiling. The two PVC sleeves are open at their ends resulting in penetrations through the fire resistant rated ceiling that are not sealed. 1. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device that is used to keep a door open is an impediment to rapidly closing a door to aid in containing smoke or fire. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke or fire to the area of origin.	C 189		

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C 189	Continued From page 4 Finding on 11/10/2016: a. There is a pattern of doors held open with door wedges including the following doors. Kitchen - Door from the kitchen into the dining room. Dining room - Door from the dining room that opens into the corridor. Beauty Shop - The door from the beauty shop that opens into the corridor. Laundry Room - The door from the laundry room that opens into the corridor. 3. Based on observation there is a failure to install and maintain required plumbing safety devices or equipment. Failure to maintain or install plumbing safety devices or equipment could effect all occupants of the facility if the absence of the plumbing safety devices or equipment caused the domestic water supply to become contaminated. Finding on 11/10/2016: a. Exterior at Kitchen - The water spigots for the curbed can wash do not have vacuum breakers/anti-siphon devices installed.	C 189		