

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL065045	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/07/2017
NAME OF PROVIDER OR SUPPLIER MORNINGSIDE OF WILMINGTON		STREET ADDRESS, CITY, STATE, ZIP CODE 2744 S 17TH STREET WILMINGTON, NC 28412		
(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 Biennial Follow Up Construction Survey by Dennis Harrell on 6-7-2017. Some deficiencies were not corrected. Further action is required.	{C 000}		
{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: Finding on 3-22-2017 and 6-7-2017: Based on observation, the kitchen staff was unaware of the location or use of the range hood fire suppression pull. Adequate training is required to ensure they can locate it in an emergency.	{C 166}		
{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.	{C 189}		

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

TITLE

(X6) DATE

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{C 189}	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings on 3-22-2017 and 6-7-2017; a. One of the smoke barrier doors near the 1st floor elevator did not close or latch when activated by the fire alarm system. b. One of the smoke barrier doors near the coffee parlor did not close or latch when activated by the fire alarm system. c. One of the smoke barrier doors on other side of the coffee parlor did not close or latch when activated by the fire alarm system. d. One of the smoke barrier doors near the 2nd floor elevator failed to latch when closed. f. The door to the soiled lined room has a 45 minute frame as required, but the required 45 minute fire rated door has been replaced with a 1 3/8 inch thick hollow door. g. The fire rated door to the beverage room near the kitchen was wedged open. h. The one-hour fire rated door to the kitchen was blocked from closing by a cart. o. One door to the 2nd floor community room was wedged open. p. The door to room 124 does not fit the opening properly to be resistant to the passage of smoke. 2. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the	{C 189}		

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{C 189}	Continued From page 2 possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings on 3-22-2017 and 6-7-2017: d. Unsealed penetration in the wall of the Electrical Equipment room near the kitchen, e. Unsealed penetration in elevator room, 3. Based on observation, battery powered emergency lights would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. Mal-functioning lights include the following areas on 3-22-2017 and 6-7-2017: b. Main electrical room.	{C 189}		