STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL092207	A. BUILDING: **01, 02** B. WING _____	**05/02/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELMCROFT OF NORTHRIDGE	**600 NEWTON ROAD RALEIGH, NC 27609**

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C 000	Initial Comments Report of a Biennial Construction Survey by Suzanna Fay and Frank Strickland May 2, 2018. Records indicate the original building, Main Street, was first licensed on February 1, 1985 and the annex was first licensed on June 23, 1995. The facility is currently licensed for a total of 161 Beds with a 58 Bed Special Care Unit. 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 (1st building) and the 1991 (2nd building) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1984 and 1994 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited which require a Plan of Correction.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm",	C 101		

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C 101	Continued From page 1 copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Observations revealed that the facility did not meet the building code requirements at the time of construction, change in service or alteration. Magnetic locking systems are required to release with the activation of the fire alarm to allow for evacuation from the building. Findings on May 2, 2018: a. SCU- the building exits all feed into an enclosed courtyard. The courtyard has three gates equipped with a magnetic locking system. One of the gates is designated as the exit. None of the gates released when the fire alarm was activated. b. Both buildings have magnetic locks on some doors and gates. Interview with staff revealed that only a few staff had keys for the manual overrides. All staff responsible for evacuation must carry keys for the manual override switches.	C 101		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Observations revealed that the corridors were not maintained free of all equipment and other obstructions.	C 150		

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C 150	Continued From page 2 Findings on May 2, 2018: a. Annex, lower level - the exit corridor outside of physical therapy had therapy equpment in the corridor with no staff or residents present. There was a chair, a table, a stool and yoga ball in the middle of the corridor in front of the exit door.	C 150		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (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; This Rule is not met as evidenced by: 1. Observations revealed that the exterior of the building was not maintained in a clean and safe condition. Findings on May 2, 2018: a. Annex - a section of the aluminum soffit has dropped at the right side leaving holes in the soffit for pests to enter. b. Walkway between buildings - the middle section of rail (road side) is loose.	C 160		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 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;	C 164		

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C 164	Continued From page 3 (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: 1. Observations revealed that the furnishings were not kept in good repair. Findings on May 2, 2018: a. Annex lower level - the screws were backing out of the short handrail near the elevator rendering the handrail unstable. This was corrected at the time of survey. b. SCU, Room 45 - the door hardware is very loose. This was repaired at the time of survey. c. SCU - the bracket was loose on the handrail outside of Room 12. This was corrected at the time of survey. d. SCU, Room 4 - the door hardware was loose. This was repaired at the time of survey. e. The handrail between Rooms 9 and 10 was loose. This was repaired at the time of survey. 2. Observations revealed that the floors were not kept clean and free of offensive odors. Findings on May 2, 2018: a. Laundry room - detergent had spilled between the washers and the floors had a thick white coating of detergent between and behind the washers. Rags were on the floor behind the washers. b. SCU, Room 30 - had a strong offensive odor.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS	C 166		

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C 166	Continued From page 4 (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. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on May 2, 2018: a. Second floor AL Oxygen Storage - there were two unrestrained oxygen bottles stored in the room. 2. Observations revealed that the facilities were not maintained free of hazards. Findings on May 2, 2018: a. Annex, lower level - there is a grease trap in the floor of the corridor leading toward the exit to the second building. The cover is not flush with the floor and moves when stepped on, creating a possible trip hazard. 3. Based on observation the facility is not maintained free from hazards. If the code required clearance of 36" in front of electrical breaker panels is not maintained it could delay timely operation of the breakers in an emergency situation. Findings on May 2, 2018: a. Main Street storage - numerous boxes of light bulbs were stored in front of the electrical panel.	C 166		

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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 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. Findings on May 2, 2018: a. Discovery Room, 201 - the escutcheon plate has dropped at the sprinkler heads in the bath and in the closet leaving gaps in the rated ceiling assembly. b. Corridor outside Room 204 - the escutcheon plate has dropped at the sprinkler head leaving a gap in the fire rated ceiling assembly. c. Corridor at Zone 4 exit door - the sprinkler head has shifted leaving holes in the fire rated ceiling assembly. d. Linen closet across from 204 - there is a hole in the ceiling at the sprinkler head. e. AL Second floor Living Room - the escutcheon plate has dropped at the sprinkler head leaving a gap in the fire rated ceiling assembly. f. AL Second floor corridor outside of Dining - the escutcheon plate has dropped at the sprinkler	C 189		

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C 189	Continued From page 6 head leaving a gap in the fire rated ceiling assembly. g. AL Second Floor Oxygen Storage - there are two unsealed conduits from the fire alarm panel penetrating the ceiling. There is also a 1" diameter hole cut in the ceiling over the fire alarm panel. h. Room 211 - the ceiling is damaged at the sprinkler head in the closet. i. Room 211 - the escutcheon plate has dropped at the sprinkler head outside the closet leaving a gap in the fire rated ceiling assembly. j. There was a pattern of dropped escutcheon plates throughout the AL Annex building. k. Annex, lower level - there is a hole, approximately 4"x6" through the corridor wall above the lay-in ceiling adjacent to Room 108. This was repaired at the time of survey. l. SCU, Room 21 - the ceiling at the sprinkler head was damaged and patched. The patch is not holding and is separating from the ceiling. m. SCU, Housekeeping closet - there is a hole, approximately 4" in diameter in the back corner. The ceiling is falling around the hole and there are yellow stains around the opening. n. SCU, Kitchen pantry - the escutcheon plate has dropped at the sprinkler head leaving a gap in the fire rated ceiling assembly. o. SCU, left Solarium - there is one unsealed conduit from the magnetic hold open device penetrating the ceiling assembly. p. Main Street storage - an unsealed hole was cut in the ceiling for a condensate line. q. Exterior Mechanical Room - ther is an unsealed cable bundle penetrating the ceiling above the main electrical panel. r. SCU, Housekeeping closet - there is a nonrated ceiling access panel in the rated ceiling of the closet.	C 189		

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C 189	Continued From page 7 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on May 2, 2018: a. AL Second floor Oxygen Storage - one of the bulbs in the emergency light was loose and hanging from its wires. b. Annex - Zone 5 - the exit light was not illuminated. c. SCU - the emergency light by Room 20 did not illuminate when tested. d. SCU - the exit sign outside of Room 34 was not illuminated. 3. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating due to sprinkler heads being obstructed could effect occupants in the fire compartment if the sprinkler head could not suppress a fire. Findings on May 2, 2018: a. Annex, Main Storage room on the lower level - items were being stored within 18" of the ceiling. b. SCU, Kitchen pantry - items were being stored within 18" of the ceiling. 4. Based on observation electrical equipment has not been maintained in a safe manner. Findings on May 2, 2018: a. Oxygen Storage, AL Second floor - the electrical outlet below the fire alarm panel is loose and the cover is pulling away from the wall. 5. Based on observation there is a failure to	C 189		

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C 189	Continued From page 8 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. Findings on May 2, 2018: a. SCU Dining - the dining room door on the side toward the left wing has a magnetic hold open connected to the fire alarm. The magnet released upon activation of the alarm, but the door drags on the carpet and did not close. This was repaired at the time of survey. b. SCU, Room 14 - the door did not latch when closed. 6. Based on observation the facility's fire safety equipment is not maintained in operating condition. Findings on May 2, 2018: a. Main Street Storage - the attic access panel is severely damaged and no longer provides the fire rating separation required.	C 189		