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	HAL034099	A. BUILDING: **01** B. WING _____	**05/16/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARILLON ASSISTED LIVING OF CLEMMONS	**1165 S PEACE HAVEN RD CLEMMONS, NC 27012**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on May 16, 2018. Record indicate that the facility was licensure on August 20, 2014 for Ninety-Six (96) Beds, of which Thirty-Six (36) are Special Care Beds. Based on the above information, the facility is required to meet the 2005 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirmed and the 2012 North Carolina State Building Code, Section 407, Institutional Occupancy, Group I-2. Deficiencies were cited that 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", copies of which are available at the Division of Health Service Regulation at no cost;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, the Special Locking system did not meet Building Code at the time of construction or alteration. Findings on May 16, 2018: a. C Hall Staff Station - the central on/off emergency release switch had no identifying label as required by Code. In addition, staff had no knowledge of the switch and its function.	C 101		
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. Based on record review, and interview with Maintenance Technician and Business Office Manager the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on May 16, 2018: a. A current Fire Marshal Inspection Report was not available for review by the Surveyor. b. A current Annual Sprinkler System Inspection and Testing Report in accordance with NFPA 25, was not available for review by the Surveyors. c. A current Annual Fire Alarm System Inspection and Testing Report in accordance with NFPA 72, was not available for review by the Surveyor	C 111		

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C 150	Continued From page 2	C 150		
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. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on May 16, 2018: a. C Hall Staff Station - In front of the Staff Station, there are two unattended medication cart, which is decreasing the required six feet width corridor to three feet seven inches.	C 150		
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; (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. Based on Observation, the facility failed to prevent chronic unpleasant odors. This would affect residents, staff, and visitors by exposing them to an unpleasant environment. Findings on May 16, 2018:	C 164		

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C 164	Continued From page 3 a. A Hall Soiled Utility - the utility sink's plumbing trap has dried-up, allowing sewer gases to enter the Building. b. B Hall Janitor - the mop sink's plumbing trap has dried-up, allowing sewer gases to enter the Building. 2. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on May 16, 2018: a. A Hall Janitor - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint. b. Bedroom D - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint.	C 164		
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 Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on May 16, 2018: a. Bedroom A17 - a portable medical oxygen cylinder is stored standing up on the floor not secured.	C 166		

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C 166	Continued From page 4 b. Bedroom B2 - a portable medical oxygen cylinder is stored standing up on the floor not secured. c. Service Corridor - six portable medical oxygen cylinders are stored, standing up on the floor in a cardboard crate not secured.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift 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 Record review and interview with Maintenance Technician & Business Office Manager, fire drill rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on May 9, 2018: a. In the 1st quarter for the last 12 months, no rehearsal was performed during 1st and 2nd and 3rd shift. b. In the 2nd quarter for the last 12 months, no rehearsal was performed during 1st shift. c. In the 3rd quarter for the last 12 months, no rehearsal was performed during 2nd and 3rd	C 185		

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C 185	Continued From page 5 shift. d. In the 4th quarter for the last 12 months, no rehearsal was performed during 1st and 3rd shift 2. Based on Record review and interview with Maintenance Technician & Business Office Manager, the Facility failed to document the time of the rehearsals, and a short description of what the rehearsal involved. Findings on May 9, 2018: a. The rehearsal records did not included the time, and no description of what the rehearsal involved.	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) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on May 16, 2018: a. Corridor near Bedroom A14 - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed.	C 189		

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C 189	Continued From page 6 b. Corridor near B Hall Spa - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. c. Corridor near Bedroom D14- the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. d. C Hall Activity - the wall-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on May 16, 2018: a. B Hall Smoke Barrier - the right leaf, of the double-egress cross-corridor doors, did not latch when the fire alarm system released the doors. 3. Based on Observation, fire rated doors of hazardous or Incidental areas are not being maintained in a safe and operating condition. By not maintaining the fire and smoke resistance of doors, keeping rooms the NC State Building Code defines as "Hazardous or Incidental Area" separated from the rest of the Building. This could affect residents, staff and visitors if smoke/fire is not contained in Room of origin. Findings on May 16, 2018: a. Service Hall Soiled Linen - the corridor door, part of the fire-resistance-rated enclosure (45 min rated door and self-closing), did not latch into its frame. b. Service Hall & Laundry - the door, part of the fire-resistance-rated enclosure (45 min rated door and self-closing), did not latch into its frame, and	C 189		

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C 189	Continued From page 7 is wedged open. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on May 16, 2018: a. Kitchen -since the last semi-annual maintenance of the commercial kitchen hood's fire suppression system, performed in January 2018, there has been no documentation of the monthly in-house/owner inspection. 5. Based on observations, the Building was not maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler heads' spray cannot reach are area of a room. Findings on May 16, 2018: a. Storage near Bedroom B11 - items are being stored within 18 inches below the fire sprinkler head. b. Storage on D Hall - items are being stored within 18 inches below the fire sprinkler head. 6. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on May 16, 2018: a. A Hall Laundry - the corridor door did not latch into its frame when closed. 7. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if	C 189		

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C 189	Continued From page 8 not contained in Room of origin. Findings on May 9, 2018: a. A Hall End Porch- the joints of a one-hour fire-resistance-rated gypsum ceiling assembly are deteriorating and cannot stop a fire. 8. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin. Findings on May 16, 2018: a. B Hall End Porch - the fire sprinkler escutcheon plate has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. b. Regional Office - the fire sprinkler is missing its escutcheon plate, exposing an opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat. c. D Hall Electrical Room - the fire sprinkler escutcheon plate has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.	C 189		
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 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;	C 199		

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C 199	Continued From page 9 (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: 1. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on May 16, 2018: a. A Hall Soiled Utility - the required exhaust ventilation system did not work, and there is odor. b. B Hall Spa - the required exhaust ventilation system did not work, and there is odor. c. B Hall Janitor - the required exhaust ventilation system did not work, and there is odor.	C 199		