

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL077012	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 10/03/2018
NAME OF PROVIDER OR SUPPLIER HERMITAGE RETIREMENT CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 139 MALLARD LANE ROCKINGHAM, NC 28379		
(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 10-3-2018. Some deficiencies were not corrected. Further action is required.	{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; This Rule is not met as evidenced by: 1. Based on observation, the Building failed to meet NC State Building Code at the time of initial Licensing by not having all the required components of a properly operating "Special Locking System" on the exits that prevent free egress. This could affect all persons if they cannot egress quickly through these exits during an emergency. Finding on 10-3-2018: SCU Exit gate from courtyard - the lock on the	{C 101}		

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

TITLE

(X6) DATE

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{C 101}	Continued From page 1 gate is still a momentary switch. The gate opens when the emergency release switch is activated but relocks before the switch is reset.	{C 101}		
{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: 3. Based on observation, the building walls are not kept clean and in good repair. Finding on 10-3-2018: f. Middle Section Exterior Mech Room -an equipment leak has wet the floor and the leak has traveled under the wall. This gypsum wall has absorbed some of this water and now has mold growth. This water may have migrated into the adjacent room. 4. Based on observation, the building ceilings are not kept clean and in good repair. Finding on 10-3-2018: a. Bedroom 13 - the textured ceiling is detaching from the ceiling in several small areas. c. SCU Laundry Chute Room - there is a ceiling leak in this room. Note; Roof leaks have been made worse by the recent hurricane.	{C 164}		

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{C 189}	Continued From page 2	{C 189}		
{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: 2. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in Room of origin. Findings on 10-3-2018: n. Middle Section Telephone Equipment Room - there are gaps around two conduits not firestopped as they penetrate the fire-resistance-rated ceiling assembly. Unrated foam was incorrectly used to seal the gaps. o. Middle Section Telephone Equipment Room - there is a hole not firestopped as it penetrates the fire-resistance-rated wall assembly. Unrated foam was incorrectly used to seal the hole. q. Middle Section Exterior Mech/Water Heater Room - there is a gap around a conduits not firestopped as it penetrates the fire-resistance-rated ceiling assembly. r. Middle Section Exterior Mech/Water Heater Room - the ductwork does not have flanges as it penetrates the fire-resistance-rated ceiling assembly. s. Middle Section Exterior Mech Room - the	{C 189}		

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{C 189}	Continued From page 3 ductwork does not have flanges as it penetrates the fire-resistance-rated ceiling assembly. u. Middle Section Exterior Mech Room - there is an open-ended sleeve with cable bundle not firestopped as it penetrates the fire-resistance-rated ceiling assembly. bb. SCU Laundry Chute Room - the fire-resistance-rated wall had been fixed but the rated chute door was left partially open. jj. Kitchen - there is an unsealed penetration at a camera wire. kk. Basement Shop - there appears to be a small duct without a radiation damper. 5. Based on Observation, the Building was not maintained in a safe and operating condition, because some building components failed to function as originally intended or are missing. This could affect all residents, staff and visitors if the component does not function and cannot contain smoke/fire in the fire compartment of origin Findings on 10-3-2018: a. SCU Left Firewall - the panic hardware are missing their end covers, where the vertical rods latch into the frame. Note; Interview with maintenance staff indicated the parts have been ordered but have not yet been received. 8. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on 10-3-2018: f. Bedroom 19 - the corridor door does not latch when closed. m. Kitchen - the Dining Room door was propped open with a chair. This prevents the rapid closing of the door. 9. Based on observation, the smoke tight corridor	{C 189}		

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{C 189}	Continued From page 4 doors are not maintained in a safe and operating condition. Findings on 10-3-2018 a. Anson Community Nutrition Station - the corridor door has been replaced with one that is 1 3/4 inches thick of solid construction but it drags on the floor and is difficult to close and latch.	{C 189}		
{C 191}	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 facility failed to prevent the use of portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if heater is the ignition source of a fire. The danger increases if used by resident or combustible material is near. Findings on 10-3-2018: Basement shop - a portable electric heater was found in this room. Note this deficiency was corrected during the survey.	{C 191}		
{C 199}	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT	{C 199}		

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{C 199}	Continued From page 5 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; (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. Finding on 10-3-2018: c. Women near Carolina Commons - the required exhaust ventilation system did not work, and there is odor.	{C 199}		