STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL039015	A. BUILDING: **01** B. WING _____	R **02/11/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HERITAGE MEADOWS LONG TERM CARE	**6659 PRIVATE SCHOOL ROAD OXFORD, NC 27565**

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{C 000}	Initial Comments Construction Section Follow-up Survey report by Frank Strickland and Suzanna Fay on 02/11/2019: Some of the previous cited deficiencies have been corrected. However, there are outstanding deficiencies that require correction action and a new Plan of Correction is required.	{C 000}	C-101 Corrective Action After conversation with the Armstrong Technical Department it was determined that the current tile is not UL tested; however, there are similar tiles with the same design and structured that have been UL tested and rated for a concrete building with a corrugated metal roof (see attached specification). Upon our request, the Fire Marshall has reviewed the documentation and feels that we comply with a one-hour fire rating requirement and will share his evaluation with you if necessary. The lights are UL tested and appropriate for this setting. If the Construction Section feels we have not met the one-hour rating requirement, we will replace the tiles with appropriate material. (Note) It is also our opinion that the State was aware that these tiles were being used, photographed the boxes, and then approved them in their letter January 11, 2019. It was only after reinspection and completion of 75% of the building that they were deemed inappropriate materials. The cost of materials and labor to remove the pre-approved tiles would be in excess of $25,000. If our only option is to replace the tiles, we will pursue any legal remedy available to us. Responsible Staff: Owner	
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: New Deficiency from 02/11/2019 Based on observation, interview and review of product documentation the facility does not meet code requirements in effect at the time of renovation or alteration resulting in the fire resistance rating of the structure being compromised. Compromising the fire resistance	C 101		TBD

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C 101	Continued From page 1 rating of the structure may result in a fire not being controlled and contained long enough to allow for evacuation. Findings on February 11, 2019. a. There were several pallets of ceiling tile in the facility. Interview with staff revealed the material is to be used to replace the tile in the West Wing bedroom ceilings because some of these existing tiles are discolored, some are water stained and some are sagging. The label on the boxes identified the tiles as Armstrong Model 942. Review of product documentation from the Armstrong web site revealed that Model 942 ceiling tiles have not been tested in a UL Fire Rated Assembly and do not provide the required structural protection against fire. b. Observation of the East Wing bedroom ceilings revealed that these ceiling tiles look new. It was unconfirmed at the time of survey which Model ceiling tiles had been installed in these ceilings. c. Obervation of the East Wing bedroom ceilings identified that the original surface mounted light fixtures have been replaced with lay in light fixtures. It was unconfirmed at the time of survey if the fixtures were supported as required by a UL Fire Rated Assembly. It was unconfirmed at the time of survey if the fixtures were provided with a 'tent' of the proper dimensions and made of the proper ceiling tile. d. [The following is a related issue previously cited under Tag 189] The following locations have failures/damage to the one-hour protected lay-in ceiling construction: Assure that lights penetrating the ceiling are properly protected.	C 101		

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C 101	Continued From page 2 (c) East Wing corridor lay-in ceiling/light fixture connections (g) Central Hall	C 101		
C 110	Construction-Meet Sanitary Requirements SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION (e) The sanitation, water supply, sewage disposal and dietary facilities shall comply with the rules of the North Carolina Division of Environmental Health, which are incorporated by reference, including all subsequent amendments. The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", 15A NCAC 18A .1300 are available for inspection at the Department of Environment and Natural Resources, Division of Environmental Health, 2728 Capital Boulevard, Raleigh, North Carolina. Copies may be obtained from Environmental Health Services Section, 1632 Mail Service Center, Raleigh, North Carolina 27699-1632 at no cost. This Rule is not met as evidenced by: 3-New Citation Based on observation, this facility has failed to meet all of the The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", Findings on 02/11/2019 Signs of mice activity were seen in the facility. Dead mice were found in the Kitchen and in	C 110	C-110 Corrective Action We have contacted the exterminating company and informed them of our rodent issue. They will adjust accordingly to assure that the issue is addressed. We have notified the vending company of the issue and asked them to remove the food machines. Responsible Staff: Owner	3/31/2019

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C 110	Continued From page 3 Room 13. Additionally, it appears some mice are getting their food source from the vending machines as some of the vending items were wholly or partially consumed and mice droppings are present at the base of the vending machine.	C 110		
C 132	Bathrooms-Must Provide Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (5) The bathrooms and toilet rooms shall be designed to provide privacy. Bathrooms and toilet rooms with two or more water closets (commodes) shall have privacy partitions or curtains for each water closet. Each tub or shower shall have privacy partitions or curtains; This Rule is not met as evidenced by: 1-Based on observation, all of the bathrooms and toilet rooms are not designed for privacy. Findings on 02/11/2019: The spas in the West Wings do not have privacy curtains in place and the Tub Bath Room has a wood shower curtain frame that is not secured to the wall.	C 132	C-132 Corrective Action As presented and approved on earlier responses, we will address all West Wing issues as we begin opening the wing for residents. It is our intentions that the entire rennovations are complete before any resident occupies the West Wing. Until the completion of the rennovation, access to the wing will be restricted. Responsible Staff Owner Maintence	6/1/2019
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 4 (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, this facility has failed to provide floor coverings in a clean and well kept manner. Findings on 02/11/2019 The floor finishes in the following rooms are not completely clean in the West Wing: (a) Room 11 (b) Room 12 (c) Room 13 (d) Room 14 (e) Room 15 (f) Room 16 (g) Room 17 (h) Room 18 (i) Room 19 (j) Room 20 2-Based on observation, this facility has failed to provide ceiling coverings in a clean and well kept manner. Findings on 02/11/2019 Mano of the ceiliing tiles are sagging, discolored and damaged due to water migration at the following rooms in the West Wing: (a) Room 11 (b) Room 12 (c) Room 13 (d) Room 14 (e) Room 15 (f) Room 16 (g) Room 17 (h) Room 18	C 164	C-164 Corrective Action As presented and approved on earlier responses, we will address all West Wing issues as we begin opening the wing for residents. It is our intentions that the entire rennovations are complete before any resident occupies the West Wing. Until the completion of the rennovation, access to the wing will be restricted. Responsible Staff Owner Maintence	6/1/2019

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C 164	Continued From page 5 (i) Room 19 (j) Room 20	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, this facility has failed to be maintained in a clean and orderly manner. New Findings on 02/11/2019: a. There is a roof leak at the entrance are to Room 14 that has damaged the ceiling tile and stained the floor finish. b. There is a roof leak where the Kitchen range exhaust hood ductwork pentrates the roof and water is leaking at the edge of the hood in the front onto the floor. 3-Based on observation, this facility has failed to be maintained in a clean and orderly manner. Findings on 02/11/2019: Most of the rubber gasket material for the exterior resident room windows is either missing or partially installed that would allow water migration into the rooms from the exterior. Based on interview of maintenance personal, this work is	C 166	C-166 Corrective Action 1. The roof will be repaired to stop leakage and damaged tiles re-placed 2. As presented and approved on earlier responses, we will address all West Wing issues as we begin opening the wing for residents. It is our intentions that the entire rennovations are complete before any resident occupies the West Wing. Until the completion of the rennovation, access to the wing will be restricted. 3. The metal roof coping will be secured 4. Roof shingles will be 5. The walls will be painted and the cause of the leak addressed. Responsible Staff Owner Maintence	3/31/2019 6/1/2019 3/31/2019 3/31/2019 3/31/2019

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C 166	Continued From page 6 planned to be completed when the blinds are installed. 4-Based on observation, this facility has failed to be maintained in a clean and orderly manner. New Findings on 02/11/2019: The metal roof coping is not secured to the roof construction located outside the Living Room/West Wing. 5-Based on observation, this facility has failed to be maintained in a clean and orderly manner. New Findings on 02/11/2019: There are roof shingles that are missing outside the Living Room in the Living Room/West Wing. 6-Based on observation, this facility has failed to be maintained in a clean and orderly manner. New Findings on 02/11/2019: The Shower Bathroom in the West Wing, has rust stains on the walls and on the floor from leaking water control valves.	C 166		
C 170	Housekeeping-Curtains, Blinds, Res. Privacy SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (9) have curtains, draperies or blinds at windows in resident use areas to provide for resident privacy; (e) This Rule shall apply to new and existing facilities.	C 170		

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C 170	Continued From page 7 This Rule is not met as evidenced by: 1. Based on observation, this facility has not provided draperies or blinds in the resident bedrooms to provide for resident privacy. Findings on 02/11/2019: The following resident bedrooms do not have window treatments for privacy in the West Wing: (a) Room 11 (b) Room 12 (c) Room 13 (d) Room 14 (e) Room 15 (f) Room 16 (g) Room 17 (h) Room 18 (i) Room 19 (j) Room 20	C 170	C-170 Corrective Action As presented and approved on earlier responses, we will address all West Wing issues as we begin opening the wing for residents. It is our intentions that the entire rennovations are complete before any resident occupies the West Wing. Until the completion of the rennovation, access to the wing will be restricted. Responsible Staff Owner Maintence	6/1/2019
C 174	Bedroom Furnishings-Table, Mirror, Chairs SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (2) a bedside type table; (3) chest of drawers or bureau when not provided as built-ins, or a double chest of drawers or double dresser for two residents; (4) a wall or dresser mirror that can be used by each resident; (5) a minimum of one comfortable chair (rocker or straight, arm or without arms, as preferred by resident), high enough from floor for easy rising; (6) additional chairs available, as needed, for use by visitors; (e) This Rule shall apply to new and existing	C 174	C-174 Corrective Action As presented and approved on earlier responses, we will address all West Wing issues as we begin opening the wing for residents. It is our intentions that the entire rennovations are complete before any resident occupies the West Wing. Until the completion of the rennovation, access to the wing will be restricted. Responsible Staff Owner Maintence	6/1/2019

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C 174	Continued From page 8 facilities. This Rule is not met as evidenced by: 1. Based on observation, this facility has failed to provide furnishings clean and in good repair for each resident bedroom. Findings on 02/11/2019: The following resident bedrooms have chests of drawers and furniture that are missing, in disrepair, missing hardware or have unsuitable finishes in the West Wing: (a) Room 11 (b) Room 12 (c) Room 13 (d) Room 14 (e) Room 15 (f) Room 16 (g) Room 17 (h) Room 18 (i) Room 19 (j) Room 20	C 174	C-175 Corrective Action As presented and approved on earlier responses, we will address all West Wing issues as we begin opening the wing for residents. It is our intentions that the entire rennovations are complete before any resident occupies the West Wing. Until the completion of the rennovation, access to the wing will be restricted. Responsible Staff Owner Maintence	6/1/2019
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, this facility has failed to provide in good repair towel bars for each	C 175		

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C 175	Continued From page 9 resident bedroom and bathrooms. Findings on 02/11/2019: The following resident bedrooms do not have the required towel bars in place or in good repair in the West Wing: (a) Room 11 (b) Room 12 (c) Room 13 (d) Room 14 (e) Room 15 (f) Room 16 (g) Room 17 (h) Room 18 (i) Room 19 (j) Room 20	C 175		
C 179	Fire Alarm System-Shall Transmit Automatic SECTION .0300 - PHYSICAL PLANT 10a NCAC 13F .0307 FIRE ALARM SYSTEM (a) The fire alarm system in adult care homes shall be able to transmit the fire alarm signal automatically to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. This Rule is not met as evidenced by: 1-Based on observation and interview, the fire alarm system does not tranmit any signal.	C 179	C-179 Corrective Actions The fire alarm is monitored and transmitting a signal.	1/15/2019
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 189		

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C 189	Continued From page 10 (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, this facility has failed to maintain the fire resistance components to maintain the facility in a safe condition. Failure to maintain fire resistance components can allow the spread of smoke and fire during a fire emergency. Finding on 02/11/2019: The following locations have failures/damage to the one-hour protected lay-in ceiling construction: Assure that lights penetrating the ceiling are properly protected. (a) The ceiling tiles at East Wing Exit door ceiling bulk-head have shifted out of place. 2. The facility has not maintained all fire safety equipment in a safe and operating condition. New Finding on 02/11/2019: Observation of the fire alarm panel revealed the panel was in the trouble mode. According to the troupble code, there is some problem with the connection to the monitoring company. 2-Based on observation, this facility has failed to maintain the fire safety components in a safe and operational condition. New Finding on 02/11/2019: There is a 2"" hole in the corridor wall construction above the emergency corridor light	C 189	C-189 Corrective Action 1. Previously address in C-101 2. Fire Alarm is not in trouble mode and transmitting a signal 3. The hole in corridor wall will be repaired. 4. We will add the fire protection around the MC penetrations above the fire doors 5. The bottom door hinge will be repaired or replaced. 6. The sink will be repaired. Responsible Staff: Maintenance	3/31/2019

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C 189	Continued From page 11 unit between Rooms 14 & 15/West Wing. 3-Based on observation, this facility has failed to maintain the fire safety components in a safe and operational condition. New Finding on 02/11/2019: Above the fire-doors at the West Wing, there are electrical MC penetrations through the one-hour ceiling construction that are not fire protected. 4-Based on observation, this facility has failed to maintain the plumbing fixture components in an operational condition. New Finding on 02/11/2019: The P-trap for the sink in the Bathroom #1/East Wing is leaking and is need of replacement. 5-Based on observation, this facility has failed to maintain the building components in a safe and operational condition. New Finding on 02/11/2019: The entry door for the Bathroom #2/East Wing does latch properly due to loose bottom door hinges.	C 189		