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	HAL065045	A. BUILDING: 01 B. WING _____	04/04/2019

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MORNINGSIDE OF WILMINGTON	2744 S 17TH STREET WILMINGTON, NC 28412

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C 000	Initial Comments Report of Construction Section Biennial Survey by Suzanna Fay and Ed Miller on April 4, 2019. Records indicate this facility was first licensed on June 25, 1997 for 101 residents with a 44 Bed Special Care Unit. Therefore, we are requiring that this facility meet the 1996 Regulations for Homes for the Aged and Disabled ; Minimum standards and Regulations, the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or More Beds and the 1996 edition of the North Carolina State Building Code Volume I - General Construction - Section 409 Institutional Occupancy (Group I).	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. Observations revealed that the facility did not	C 101		

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C 101	Continued From page 1 meet the building code requirements in effect at the time of construction, addition or renovation. Areas open to the corridors are required to have the same coverage as the corridors. Findings on April 4, 2019: a. SCU - the doors to the Day Room have been removed making it open to the corridor. There are no smoke detectors in the Day Room. b. SCU Dining - the dining area is open to the corridor. There is not a smoke detector located in the larger portion of the Dining Room. 2. Observations revealed that the facility did not meet Licensure Rule requirements in effect at the time of construction, addition or renovation. Dining Rooms (non SCU) are required by 13F .0305(c)(1) to be located off a lobby or corridor and enclosed with walls and doors. c. First Floor Dining - the dining area is open to the corridor. . d. First Floor Small Dining - the dining area is open to the corridor.	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. Review of records revealed that the facility did not have current fire safety inspection reports available for review.	C 111		

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C 111	Continued From page 2 Findings on April 4, 2019: a. A copy of the current fire inspection report was not available for review. Interview with staff revealed that the annual inspection had been conducted the previous week and they did not have the report at this time.	C 111		
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 facility did not maintain corridors and paths of egress free of equipment and obstructions. Findings on April 4, 2019: a. First Floor Stairwell - walkers are being stored in the stairwell.	C 150	Removed	4.5.19
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.	C 164		

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C 164	Continued From page 3 This Rule is not met as evidenced by: 1. Observations revealed that the walls were not kept in good repair. Findings on April 4, 2019: a. SCU Room 228 - there is a 1 1/2" x 4" hole in the wall behind the door. b. SCU Room 238 - there is a hole in the wall behind the closet door. c. First Floor Business Office - there is a 3"x 5" hole in the wall behind the door. 2. Observations revealed that the furnishings were not kept in good repair. Findings on April 4, 2019: a. Conference Room - one of the arm rests has broken off of a chair. 3. Observations revealed that the ceilings were not kept clean. Findings on April 4, 2019: a. Kitchen - the sprinkler head over the dishwash area has a heavy accumulation of dust. b. SCU Spa by Nurses' Station - the exhaust fan has a heavy accumulation of dust.	C 164	Maintenance work orders 656, 657, 658 Removed Cleaned	Due by 5-30-19 4-8-19 4-4-19
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	C 166		

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C 166	Continued From page 4 facilities. This Rule is not met as evidenced by: 1. Based on observation the facility was not maintained free from hazards. 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 April 4, 2019: a. Room 137 - one oxygen tank was unsecured and leaning against the exterior wall. 2. Observations revealed that the facility was not maintained free of hazards. Findings on April 4, 2019: a. SCU Kitchen - the door hardware has been removed from the double doors. When the doors are closed there is not a means of opening the doors from inside the kitchen which could allow someone to become trapped in the kitchen.	C 166	Removed Maintenance work Order 659	4.10.19 Due by 5:30 PM
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:	C 189		

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C 189	Continued From page 5 1. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on April 4, 2019: a. Second Floor - the veneer is coming loose at the top of the cross corridor doors by the elevator which prevents the door from latching properly. b. First Floor - the left leaf on the cross corridor doors by the elevator does not automatically latch when activated by the fire alarm. 2. Based on observation there is a failure to 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 April 4, 2019: a. SCU Activity Room - the doors do not close and latch. b. SCU - the stairwell door across from Room 201 does not latch when closed. c. First Floor Dining Room - the doors to the service hall do not latch. The covers are missing on the hardware and the latching hardware is pulling loose from the face of the door. d. Kitchen - the doors to the corridor do not latch. The end caps are missing on the door hardware. e. Kitchen - the door to the janitor closet is damaged and no longer closes. f. Second Floor Nurses' Office - the hinges are damaged and the door is extremely hard to open and close.	C 189	Being evaluated by Progress Doors for repairs to be completed.	Due by 6.30.19

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C 189	Continued From page 6 3. Observations revealed that the life safety equipment was not maintained in a safe and operating condition. Findings on April 4, 2019: a. SCU - the alarm for the override switch by Room 225 did not sound when the box was opened. Further investigation revealed that the screamer had been intentionally disabled. b. SCU - the fire extinguisher near Room 237 has been removed from the cabinet. 4. 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 April 4, 2019: a. SCU - emergency light #53 by Room 227 did not illuminate on test. b. SCU - emergency light #51 by Room 235 did not stay illuminated when tested. c. SCU - emergency light #41 by the eye wash station did not illuminate on test. d. Second Floor - emergency light #35 by the nurses' station did not illuminate on test. e. Second Floor - emergency light #34 across from the Community Room did not stay illuminated on test. f. Second Floor - emergency light #32 in the Community Room "buzzed" when tested indicating a bad battery. g. Second Floor - emergency light #56 by the Beauty Salon did not illuminate on test. h. First Floor - emergency light #18 outside of Soiled Linen did not illuminate on test. i. First Floor - emergency lights #12 and #14 in the Dining Room did not illuminate on test.	C 189	a: repaired work order 629 b: FLSA to Complete Repaired work order 629	4-11-19 Due by 5-30-19 4-11-19

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C 189	Continued From page 7 j. First Floor - emergency light #9 by Room 118 did not illuminate on test. k. First Floor - emergency light #6 by Room 106 did not illuminate on test. l. First Floor - emergency light #26 in the Service Corridor is missing one globe. 5. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings on April 4, 2019: a. First Floor - the wall mounted exit light outside of the Janitorial Closet is not illuminated. b. First Floor Dining - the wall mounted exit light near the service corridor doors is not illuminated. The directional arrow insert should be removed to indicate path of travel to exit. c. First Floor - the exit sign by Room 103 did not illuminate on battery test. d. First Floor - the exit sign by outside of the stair door did not illuminate on battery test. e. First Floor - the wall mounted exit sign by Room 145 should have the directional arrow insert removed to indicate the path of travel to the nearest exit. The directional arrow at the exit sign at the cross corridor doors near Room 145 should be covered. 6. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin.	C 189	Repaired by Maintenance. Work Order 629	4.19.19

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C 189	Continued From page 8 Findings on April 4, 2019: a. Maintenance Offices - three 1 hour doors have kickdowns propping the doors open. b. Kitchen Pantry - the pantry door is tied open using plastic wrap. The pantry was not in use at the time of survey. c. First Floor - Room 129 - the door was propped open using an unapproved device. 7. 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 or walls could allow fire and smoke to spread beyond the area of origin. Findings on April 4, 2019: a. Front portico - there is a hole at one of the sprinkler heads leaving an opening in the rated assembly. b. SCU, Room 238 - the sprinkler head in the closet is missing the escutcheon plate leaving a hole in the rated assembly. c. SCU Dining - the sprinkler head in the closet is missing the escutcheon plate leaving a hole in the rated assembly. d. Second Floor, Maintenance Office - there is an unsealed penetration in the fire wall to the right of the door. e. Second Floor, Maintenance Office - there is a 3" diameter hole in the wall behind the work bench. f. Second Floor, Maintenance Office - there is an unsealed conduit penetration in the wall over the desk area. g. First Floor Janitorial Closet - there are two holes, one 1 1/2" in diameter and the other approximately 1" in diameter in the ceiling on either side of the exhaust fan.	C 189	Completed FLSA to complete PO-0033592O In progress by maintenance Work Order 647, 648	4.4.19 Due by 5.30.19 Due by 6.15.19

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C 189	Continued From page 9 h. First Floor, Service Corridor - one of the sprinkler heads near the back exit is missing the escutcheon plate leaving a hole in the rated assembly. i. Boiler Room - some of the gray spray-on fireproofing has come loose and fallen out at the hanger rods leaving holes in the fire rated assembly. j. Riser Room - the escutcheon plate has dropped at the sprinkler head leaving a gap at the ceiling. The riser pipe has shifted pulling the ceiling finish down where it penetrates the ceiling. The gray fireproofing material has come loose and fallen out at some of the penetrations, leaving holes in the fire rated assembly. k. Exterior Electrical Room - there are holes in the wall where new conduit has been run over the electrical panels and along the back wall. l. Kitchen Janitor's Closet - the escutcheon plate is missing at the sprinkler head leaving a hole in the ceiling. m. First Floor Eye Wash Station - there is a bundle of unsealed cables penetrating the ceiling assembly. n. First Floor, Room 142 - the escutcheon plates are missing from the sprinkler heads in the front area and in the closet leaving holes in the rated ceiling assembly. 8. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on April 4, 2019: a. SCU, Room 235 - has two multi-plug adaptors in use. b. Dietary Office - has multi-plug adaptors in use. This was corrected at the time of survey. c. Courtyard - the weatherproof cover is missing from the GFCI outlet by the exit door. The outlet	C 189	FLSA to complete PO-00335920 Maintenance work order 6049 FLSA to complete PO-00335920 Removed In progress by Maintenance work order 6046	Due by 5.30.19 Due by 5.30.19 Due by 5.30.19 4.4.19 Due by 5.30.19

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C 189	Continued From page 10 did not trip when tested. d. Courtyard - none of the exterior GFCI outlets along the right wing tripped when tested. e. Front Lobby - one of the cover plates for the floor outlets is missing. 9. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain 18" of clearance below the sprinkler heads could obstruct the sprinkler head's ability to suppress a fire. Findings on April 4, 2019: a. Second Floor Activity closet - items were stored to the ceiling. b. Second Floor Nurses' Office - items are stored within 18" of the ceiling. c. First Floor Service Corridor Storage Rooms - file boxes were stored to within a few inches of the ceiling. 10. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have holes in the door or gaps between the door and the door frame stops. Findings on April 4, 2019: a. Maintenance Storage - there is a 1/4" hole in the rated door at the door hardware. 11. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Damages to fire rated assemblies compromise the assembly's ability to withstand fire. Findings on April 4, 2019: a. Boiler Room - a large section, approximately	C 189	Maintenance work Order 6446 Admin. correction, Need to Schedule pick up from Iron Mountain Maintenance work Order 6447	Due by 5-30-19 Due by 6-15-19 Due by 6-30-19

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C 189	Continued From page 11 18" x 4', of the spray-on fire-proofing material has fallen off of the ceiling over the exhaust fan. Pieces of the fire-proofing material has fallen off the beams over the boiler piping. b. Exterior Electrical Room - a small section, approximately 8"x12", of the spray-on fire-proofing material has fallen off near the electrical panels.	C 189	FLSA to evaluate and repair	Due by 6-30-19
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; (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. Observations revealed that the facility did not provide exhaust ventilation in required areas. Findings on April 4, 2019: a. Second Floor Soiled Linen Room - the exhaust fan is not working. b. First Floor Soiled Linen Room - the exhaust fan is not working. c. First Floor - the fan is not working in the	C 199	Maintenance work Order 650, 651	Due by 6-30-19

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C 199	Continued From page 12 restroom beside the Janitor's Closet. d. First Floor - there are two closets being used for biohazard storage. The left closet does not have a fan and there is an unpleasant odor in the closet.	C 199	Maintenance work Order 652	Dlee by 6.30.19