

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 02/15/2024
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 a Biennial Follow Up Construction Survey by Ed Miller, conducted on February 15, 2024. There were deficiencies cited in the Biennial Construction Survey that remain to be corrected. One new deficiency was added.	{C 000}		
{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: 4. 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 February 15, 2024: b. There are multiple locations in the attic above the chapel where the fire-resistant-rated sheetrock corridor tunnel has been damaged and most of the joints were not properly finished (mud & tape). j. Nutrition Station - there is one small, sealed cable penetration that was pulled out of the ceiling.	{C 189}		

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

TITLE

(X6) DATE

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{C 189}	Continued From page 1 New Findings on February 15, 2024: mm. Attic - there was an unsealed metal sleeve penetration through the fire wall not firestopped. mmm. Attic - there was a PVC sleeve through the fire wall with its firestopping positioned outside of the sleeve. 11. Observations revealed that the plumbing equipment is not maintained in a safe, and in operating condition. Findings on February 15, 2024: a. There were several sections of exposed copper pipe in the attic without proper insulation to prevent freezing. 19. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment did not provide the required protection during a fire. Findings on February 15, 2024: a. Chapel - the attic access panel was changed to include a wooden frame above a single layer of ½ inch sheetrock. Adding a combustible wood frame to a ½ inch sheetrock panel does not increase the fire-resistant-rating for this attic access panel.	{C 189}		