| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL001159 | A. BUILDING: **01**<br>B. WING _____ | **03/20/2024** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| **MEBANE RIDGE ASSISTED LIVING** | **1999 SOUTH NC HWY 119**<br>**MEBANE, NC 27302** |

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| C 000 | Initial Comments<br><br>Report of a Construction Section Biennial Survey by Suzanna Fay conducted on March 20, 2024.<br><br>This facility was licensed on December 8, 2014 for One Hundred (100) Resident Beds including a Thirty-two (32) Beds Special Care Unit. Based on the above information, this facility is required to meet the 2005 Rules for Adult Care Homes of Seven or More Beds and the 2012 North Carolina State Building Code Section 409, Group I-2 Unrestrained Occupancy.<br><br>Deficiencies have been cited and a Plan of Correction is required. | C 000 | | |
| C 154 | Entrances/Exits-Wanderer Alarms<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT<br>(h) The requirements for outside entrances and exits are:<br>(4) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door accessible by residents shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the office of the administrator or in a location accessible only to staff authorized by the administrator to operate the control panel.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation and interview, the facility did not equip each exit with a sounding device as required when there is at least one | C 154 | | |

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| C 154 | Continued From page 1<br>resident who is disoriented or a wanderer.<br><br>Findings on March 20:<br>a. SCU - interview with staff revealed that the facility has at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer. The entrance door from the AL side into the SCU was not equipped with a sounding device. | C 154 | | |
| C 164 | Housekeeping and Furnishings-Clean, Repaired<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS<br>(a) Adult care homes shall:<br>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;<br>(2) have no chronic unpleasant odors;<br>(3) have furniture clean and in good repair;<br>(e) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the ceilings were not kept clean and in good repair.<br><br>Findings on March 20, 2024:<br>a. Theatre Room - the right front corner of the room has a large yellow water stain with a dozen small black mildew spots.<br>b. Salon - one section of the ceiling grid has pulled loose at the left wall and there are three water stained ceiling tiles at and near the exhaust fan.<br>c. Training Room - the paint along the exterior wall is flaking and peeling and there are water stains around the supply vent. | C 164 | | |

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| C 164 | Continued From page 2<br>d. D Hall Clean Linen - there are mildew stains around the HVAC vent.<br>e. D Hall Residential Laundry - there is an excessive amount of lint on the exhaust fan grille. | C 164 | | |
| C 166 | Housekeeping-Maintained Free of Hazards<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS<br>(a) Adult care homes shall:<br>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;<br>(e) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation the facility was not maintained free from hazards. Oxygen bottles were improperly stored. 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.<br><br>Findings on March 20, 2024:<br>a. Room B08 - there are eight oxygen bottles stored in a shallow plastic crate without any means of restraint to prevent them from falling or being knocked over.<br>b. Oxygen Storage - there are five shallow plastic crates filled or partially filled with oxygen bottles without any means of restraint to prevent them from falling or being knocked over.<br><br>2. Observations revealed that the facility was not free of all hazards. The exposed edges of sharp metal brackets can cut or puncture skin. | C 166 | | |

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| C 166 | Continued From page 3<br><br>Findings on March 20, 2024:<br>a. D Hall Spa - the toilet paper dispenser is broken leaving a sharp metal bracket exposed. | C 166 | | |
| C 185 | Fire Safety-Rehearsals on Each Shift<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0309 PLAN FOR EVACUATION<br>(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.<br>(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.<br>(f) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Review of records revealed that the facility has not been conducting fire rehearsals on each shift of each quarter.<br><br>Findings on March 20, 2024:<br>a. There was not a record of fire drills conducted on the second or third shift of the second quarter of 2023.<br>b. There was not a record of fire drills conducted on the second or third shift of the third quarter of 2023. | C 185 | | |
| C 189 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT | C 189 | | |

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| C 189 | Continued From page 4<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. 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.<br><br>Findings on March 20, 2024:<br>a. A Hall Storage Room - the sprinkler head escutcheon has dropped leaving a gap in the fire resistant rated ceiling.<br>b. A Hall Electrical Room - some of the fire caulk in the data sleeve has fallen out or been removed so that it is no longer properly sealed.<br>c. Room A13 - the escutcheon rings are missing on the sprinkler heads in the first closet and in the bathroom.<br>d. A Hall Activity Room Storage - there are two 1" diameter holes in the ceiling where the old light fixture was removed.<br>e. Room B12 - the escutcheon ring for the sprinkler head in the far closet is missing.<br>f. Rehabilitation Room - there is a crack through the finish in the ceiling over the front desk.<br>g. B Hall Storage - there are three 1" diameter holes in the ceiling where the old light fixture was removed.<br>h. Room C13 - two of the sprinkler head | C 189 | | |

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| C 189 | Continued From page 5<br>escutcheon rings are missing.<br>i. D Hall - the sprinkler head by the Kitchen is missing its escutcheon ring.<br>j. Room D15 - the escutcheon rings have dropped leaving gaps in the fire resistant rated ceiling.<br>k. D Hall Soiled Linen - the escutcheon ring is missing on the sprinkler head.<br>l. D Hall - the wifi box outside of Soiled Utility is not oriented to cover the junction box opening.<br><br>2. 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 affected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin.<br><br>Findings on March 20, 2024:<br>a. C Hall - the right hand door of the cross corridor doors did not latch when released by the fire alarm.<br>b. A Hall - the right hand door of the cross corridor doors did not latch when released by the fire alarm.<br><br>3. Based on observation electrical emergency/safety related equipment is not being maintained in safe operating condition. Occupants of the facility could be affected if the equipment did not function to provide clear direction for exiting during a fire or other emergency.<br><br>Findings on March 20, 2024:<br>a. A Hall - the right chevron on the exit sign at the exit door to the connecting hall was open indicating an exit to the right of which there was not. | C 189 | | |

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| C 189 | Continued From page 6<br><br>4. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage.<br><br>Findings on March 20, 2024:<br>a. B Hall - the exterior emergency light at the B Hall exit did not illuminate on test.<br>b. D Hall Courtyard - the two exterior emergency lights did not illuminate on test.<br><br>5. 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 through the surface of the door.<br><br>Findings on March 20, 2024:<br>a. Room A06 - there are two 1/4" diameter holes through the door above and below the door hardware.<br>b. Room B06 - there are two 1/4" diameter holes through the door above and below the door hardware.<br><br>6. 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 respond in the event of a fire.<br><br>Findings on March 20, 2024:<br>a. There was a pattern of exterior sprinkler heads with the escutcheons and bases having heavy corrosion.<br>b. Kitchen - the sprinkler head at the pass-through window has a heavy accumulation of grease. | C 189 | | |

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| C 189 | Continued From page 7<br>c. Laundry - the sprinkler heads have a heavy accumulation of lint.<br>d. D Hall Living Room - the sprinkler head near the corridor appears to have been painted.<br><br>7. 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 with closers do not automatically close and latch to help limit the spread of smoke or fire to the area of origin.<br><br>Findings on March 20, 2024:<br>a. C Hall Living Room - the door closer has been removed so that it no longer automatically closes and latches.<br>b. C Hall Dining Room - the door closer has been removed so that it no longer automatically closes and latches.<br>c. Laundry - the hinge is loose on the door between Clean Linen and Laundry so that it does not automatically close and latch.<br><br>8. Observations revealed that the plumbing equipment is not maintained in a safe and operating condition. The pressure relief valve on the water shall be piped from the valve to within 6" of the grade below.<br><br>Findings on March 20, 2024:<br>a. Riser Room - there is no piping on the pressure relief valve of the new water heater. | C 189 | | |
| C 199 | Exhaust Ventilation<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS | C 199 | | |

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| C 199 | Continued From page 8<br>(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:<br>(1) soiled linen storage;<br>(2) soil utility room;<br>(3) bathrooms and toilet rooms;<br>(4) housekeeping closets; and<br>(5) laundry area.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors.<br><br>Findings on March 20, 2024:<br>a. A Hall Spa - the exhaust fan does not appear to be working.<br>b. D Hall Spa - the exhaust fan does not appear to be working. | C 199 | | |