STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL068020	A. BUILDING: **01** B. WING _____	**04/03/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE CAROL WOODS RETIREMENT COMMUNI	**750 WEAVER DAIRY ROAD CHAPEL HILL, NC 27514**

(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 Construction Section Biennial Survey by Ed Miller, conducted on April 3, 2024. Records indicate this facility was first licensed as a Home for the Aged serving twelve (12) residents on October 28, 2002. Therefore, the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes and the 2002 North Carolina State Building Code Section 407 - Institutional Occupancy, Group I-2. Deficiencies were cited that require a Plan of Correction.	C 000		
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, the Building was not maintained free of hazards because the compressed gas cylinders were not properly secured. They may fall and break their valves off. This would turn the compressed gas cylinder into a dangerous projectile. Findings on April 3, 2024: a. Nurse Station - four portable oxygen cylinders were standing up on the floor and one in a carry bag standing up on the floor not chained or	C 166		

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C 166	Continued From page 1 supported by the wall or in a stan or cart. Facility Staff corrected this deficiency before the Construction Surveyor left the site. 2. Based on Observation, the Building was not maintained free of hazards, because general maintenance was not being done or has not been completed. This could affect all residents, staff, and visitors if items were broken or partially removed and left where they could harm all. Findings on April 3, 2024: a. Bedroom 61019 Bathroom - the mounting bracket for the missing towel bar remained attached to the wall. This bracket was rough and had sharp edges, which provides potential to cause harm.	C 166		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper the staff's ability to extinguish a small fire and permit it to grow larger. Findings on April 3, 2024: a. Exterior, Mech Room - the fire extinguisher was missing its annual maintenance tag. Facility Staff corrected this deficiency before the	C 183		

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C 183	Continued From page 2 Construction Surveyor left the site.	C 183		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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. (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. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Record review and interview with the Maintenance Director, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on April 3, 2024: a. In the 2nd quarter during the last 12 months, no rehearsal occurred during the 1st shift. b. In the 3rd quarter during the last 12 months, no rehearsals occurred during the 1st and 2nd shifts. c. In the 4th quarter during the last 12 months, no rehearsals occurred during the 1st and 2nd shifts.	C 185		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189		

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C 189	Continued From page 3 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: 1. 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 the room of origin. Findings on April 3, 2024: a. Exterior Mech Room - there was an open-ended sleeve with a cable bundle not completely firestopped as it penetrated the fire-resistance-rated ceiling assembly. Facility Staff corrected this deficiency before the Construction Surveyor left the site. b. Exterior, Back Flow Room - there was a seventeen inches x twenty-four inches patch that covers a hole through the fire-resistance-rated ceiling assembly. The patch was not fire-resistant-rated. Facility Staff corrected this deficiency before the Construction Surveyor left the site. 2. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on April 3, 2024: a. Nurse Station - the ground-fault circuit-interrupter (GFCI) electrical power receptacle to the right of the sink did not trip when the test button was pushed and when tested with a ground fault receptacle tester & circuit analyzer device. Facility Staff corrected this deficiency	C 189		

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C 189	Continued From page 4 before the Construction Surveyor left the site. 3. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on April 3, 2024: a. Housekeeping - a mechanical kick down was holding the corridor door open. Facility Staff corrected this deficiency before the Construction Surveyor left the site.	C 189		