

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092207	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 02 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/07/2024
NAME OF PROVIDER OR SUPPLIER TERRABELLA NORTHRIDGE		STREET ADDRESS, CITY, STATE, ZIP CODE 600 NEWTON ROAD RALEIGH, NC 27609		
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C 000	Initial Comments Report of a Biennial Construction Survey by Tod Hancock conducted on May 7, 2024. Records indicate the original building, Main Street, was first licensed on February 1, 1985, and the annex was first licensed on June 23, 1995. The facility is currently licensed for a total of 161 Beds with a 58 Bed Special Care Unit. Therefore, the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1978 (1st building) and the 1991 (2nd building) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1984 and 1994 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited which require a Plan of Correction.	C 000		
C 116	Plans Submittals and Approvals SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division	C 116	C116 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS COMMUNITY PLANS AND SPECIFICATIONS WERE SUBMITTED ON BEHALF OF COMMUNITY BY LEWIS AND BELL VERIFIED BY project HA-3307	

Division of Health Service Regulation

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

TITLE

(X6) DATE

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C 116	Continued From page 1 prior to licensure. Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division. (d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained. (e) Completed construction or remodeling shall conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder. (f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion. This Rule is not met as evidenced by: 1. Based on observation and interviews with Staff the facility performed remodeling and did not submit Construction Documents for review and approval. Findings May 7, 2024: a. The FACP and the associated devices, alarms and signaling system are being replaced. Review of records revealed that the facility did not submit plans to the Division of Health Service Regulation/Construction section for review and	C 116		

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C 116	Continued From page 2 approval.	C 116		
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. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to maintain the ceilings in good repair. Findings May 7, 2024: a. AL-Upper Level- Hall and Rooms 208 and 221- Based on observations the interior finishes suffered water damage. b. AL- Lower Level- Living Room- Based on observations the interior finishes suffered water damage.	C 164	C164 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS COMMUNITY HAD A SUPPRESSION PIPE BREAK ON 5/5/24 – COMMUNITY IMMEDIATELY CONTACTED BOTH A RESTORATION COMPANY AND FIRE SPRINKLER COMPANY WHO RESPONDED SAME DAY. 5/10/24 – ALL WORK WAS COMPLETED TO RESTORE COMMUNITY TO MEET EXPECTATIONS OF RULE .0306 COMMUNITY DESIGNEE WILL CONTINUE TO MONITOR FOR COMPLIANCE AND IMMEDIATE RESOLVE WHEN EMERGENCIES ARISE COMPLETED 5/10/24	
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.	C 166	C166 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS DOF HAS SECURED & STORED ALL OXYGEN TANKS COMPLETED 5/8/24 DOF, ED OR DESIGNEE WILL CONTINUE TO MONITOR TO ENSURE ALL OXYGEN TANKS ARE SECURED AND STORED PROPERLY – THIS IS ONGOING	

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C 166	Continued From page 3 This Rule is not met as evidenced by: 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. Findings May 7, 2024: a. East Hall-Soiled Linen Closet- There was an unsecured oxygen bottle on the floor. This was corrected at the time of the survey.	C 166		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on observation the facility is not maintaining the electrical components located near a water source in a safe manner. Findings May 7, 2024: a. AL-TMC-Spa- The receptacle adjacent to the lavatory did not trip on test indicating the lack of ground fault protection.	C 188	C188 10A NCAC 13F .0310 ELECTRICAL OUTLETS DOF REPLACED ELECTRICAL OUTLET IN SPA ROOM WITH GFCI OUTLET TO BE COMPLIANT WITH .0310 COMPLETED 5/8/24	
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 4 (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 and interviews with Staff the facility failed to maintain its fire safety equipment. Findings May 7, 2024: a. AL-Upper Level-Room 208- The fire suppression system suffered a component failure allowing water to discharge. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. Findings May 7, 2024: a. AL-Upper Level- Room- the emergency light outside of Room 213 did not illuminate on test. b. AL-Upper Level- Room- the emergency light outside of Room 208 did not illuminate on test. c. MCU- Lobby- the emergency light did not illuminate on test. d. MCU- Hallway - the emergency light at the exit door did not illuminate on test. 3. Observations revealed that the plumbing equipment was not maintained in a safe operating condition. Findings May 7, 2024:	C 189	C189 10A NCAC 13F .0311 OTHER REQUIREMENTS 1. COMMUNITY HAD A SUPPRESSION PIPE BREAK ON 5/5/24 – COMMUNITY IMMEDIATELY CONTACTED FIRE SPRINKLER COMPANY WHO RESPONDED SAME DAY. 5/10/24 – ALL WORK WAS COMPLETED TO RESTORE COMMUNITY TO MEET EXPECTATIONS OF RULE .0311 COMMUNITY DESIGNEE WILL CONTINUE TO MONITOR FOR COMPLIANCE AND IMMEDIATELY RESOLVE WHEN EMERGENCIES ARISE COMPLETED 5/10/24 2. COMMUNITY REPLACED ALL EMERGENCY LIGHTS THAT WERE NOT OPERATING PROPERLY – COMPLETED 5/13/24 DOF, ED OR DESIGNEE WILL CONTINUE TO MONITOR. DOF WILL COMPLETE MONTHLY REVIEW IN TELS. ONGOING BY COMMUNITY 3. COMMUNITY HAS ADJUSTED THE DRAIN PIPE FOR THE ICE MACHING IN SATELLITE KITCHEN TO MEET THE MINIMUM 2" REQUIREMENT FOR AIR GAP COMPLETED 5/17 DOF, ED OR DESIGNEE WILL MONITOR DRAIN PIPE TO ENSURE IT KEEPS A 2" AIR GAP - ONGOING	

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C 189	Continued From page 5 a. Kitchen- The ice machine drain does not have a 2" air gap	C 189		
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 maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the buildup humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings May 7, 2024: a. MCU-Housekeeping- the fan is not working.	C 199	C199 10A NCAC 13F .0311 OTHER REQUIREMENTS COMMUNITY HAS REPLACED THE EXHAUST FAN IN THE MC HOUSEKEEPING CLOSET. COMPLETED 5/28/24 DOF, ED OR DESIGNEE WILL CONTINUE TO MONITOR TO ENSURE EXHAUST FANS ARE WORKING PROPERLY PER .0311 ONGOING	