

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL049023	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 07/20/2023
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NAME OF PROVIDER OR SUPPLIER THE GARDENS OF STATESVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 2147 DAVIE AVENUE STATESVILLE, NC 28625
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(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}	<p>Initial Comments</p> <p>Report of a Biennial Follow Up Construction Survey by Suzanna Fay and Tod Hancock conducted on July 20, 2023.</p> <p>There is one deficiency from the Biennial Construction Survey that remains to be corrected.</p>	{C 000}		
{C 189}	<p>Building Equipment Maintained Safe, Operating</p> <p>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.</p> <p>This Rule is not met as evidenced by: 5. Based on observations, the building fire safety is not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in the room of origin.</p> <p>Findings on July 20, 2023: a. Main Wing, Laundry - the dryer duct penetrates the one-hour fire-resistant-rated ceiling. This penetration was sealed with a product that appears to be "great stuff" foam insulation. This foam is not approved for penetration through fire-resistance-rated construction.</p>	{C 189}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____