

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL060125</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>04/17/2025</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE PARC AT SHARON AMITY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4025 N SHARON AMITY DRIVE CHARLOTTE, NC 28205</b>
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{C 000}	Initial Comments  Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on April 17, 2025.  There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{C 000}		
{C 101}	Existing Licensed Fac- No less than '71 Rules  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;  This Rule is not met as evidenced by: 1. Observations revealed that the facility does not meet the requirements of NFPA 72. All doors that are required to be unlocked by the fire alarm system shall remain unlocked until the fire alarm condition is manually reset.  Findings on April 17, 2025: a. The maglocks on the exit doors all re-magnetized when the fire alarm system was	{C 101}		

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

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{C 101}	Continued From page 1  placed in silence mode. b. The hold open devices on the cross corridor doors re-engaged when the fire alarm system was place in silence mode.	{C 101}		
{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. Observations revealed that the walls, ceilings and floors were not kept in good repair.  Findings on April 17, 2025: a. Computer Room - the exhaust fan grille has been cleaned since previous survey but is collecting dust again. b. Dining - the furniture is hitting the back corner wall and damaging the sheetrock finish. The walls have been painted but the residents are hitting the wall with their chairs leaving scuff marks and gouges in the walls. c. Dining - the concrete threshold at the exit to the courtyard is broken up creating a trip hazard. Some of the broken concrete was removed but the concrete is still cracked and broken at the threshold and where the concrete slopes. d. Chemical Room - the wall has been opened up to repair a leak from above. The wall has	{C 164}		

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{C 164}	Continued From page 2  been patched but has not been sanded and painted. g. Employee Bath #2 - the wall behind the toilet is uneven and damaged along the edge of the cove base. The wall has been patched but has not been sanded and painted. The cover base under the sink is falling off of the wall.	{C 164}		
{C 175}	Bedroom Furnishings-Clean Towel, Towel Bar  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Observations revealed that the facility did not provide each bedroom with the minimum furnishings. Towel bars were not available for each resident.  Findings on April 17, 2025: a. Room 104 Bathroom - the towel bar was broken and there were not two bars for two residents.	{C 175}		
{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	{C 185}		

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{C 185}	<p>Continued From page 3</p> <p>requirement of the local Fire Prevention Code Enforcement Official.</p> <p>(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.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Review of records revealed that the quarterly fire rehearsal logs did not include a short description of what the rehearsal involved.</p> <p>Findings on April 17, 2025:</p> <p>a. There was not a short description of what the rehearsal involved included on the fire rehearsal logs.</p>	{C 185}		
{C 189}	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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.</p> <p>(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:</p> <p>1. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants</p>	{C 189}		

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{C 189}	Continued From page 4  of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.  Findings on April 17, 2025: a. The exit sign outside of the Computer Room did not illuminate on test. b. 100 Hall - the exit sign at the smoke barrier wall by Mechanical/Electrical did not illuminate on test.	{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 build up humidity that can cause mildew and slick areas and prevents the dissipation of odors.  Findings on April 17, 2025:	{C 199}		

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{C 199}	Continued From page 5  a. 100 Hall - the exhaust fans in the resident bathrooms did not appear to be working. b. 200 Hall - the exhaust fans in the resident bathrooms did not appear to be working.	{C 199}		