1200-8-6-.08 (2) Building Standards

(2) After the applicant has submitted an application and licensure fees, the applicant must submit the building construction plans to the department. All new facilities shall conform to the 2006 edition of the International Building Code, except for Chapter 11 pertaining to accessibility and except for Chapter 27 pertaining to electrical requirements; the 2006 edition of the International Mechanical Code; the 2006 edition of the International Plumbing Code; the 2006 edition of the International Fuel and Gas Code; the 2006 edition of the National Fire Protection Code (NFPA) NFPA 1 including Annex A which incorporates the 2006 edition of the Life Safety Code; the 2010 Guidelines for Design and Construction of Health Care Facilities; the 2005 edition of the National Electrical Code; and the 2005 edition of the U.S. Public Health Service Food Code as adopted by the Board for Licensing Health Care Facilities. The requirements of the 2004 Americans with Disabilities Act (A.D.A.), and the 1999 edition of North Carolina Handicap Accessibility Codes with 2004 amendments apply to all new facilities and to all existing facilities that are enlarged or substantially altered or repaired after July 1, 2006. When referring to height, area or construction type, the International Building Code shall prevail. Where there are conflicts between requirements in local codes, the above listed codes and regulations and provisions of this chapter, the most stringent requirements shall apply.

This Rule is not met as evidenced by:
Based on observations, it was determined the

The firewall next to the therapy room was sealed at the floor. The seams on fire wall in the first floor storage area were mudded and taped and the screws in the drywall were covered.

Rounds were made to ensure that all fire walls were sealed at the floor, seams were mudded and taped and screws in the drywall were covered.

Monthly rounds will be conducted by the Maintenance Supervisor to ensure that firewalls are sealed, dry wall seams are mudded and taped and screws are covered. Results of these rounds will be recorded on a log.

These logs will be presented for review at the Monthly QA&A Meeting.
<table>
<thead>
<tr>
<th>(X4) ID</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
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<tbody>
<tr>
<td>832</td>
<td>Continued From page 1</td>
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<tr>
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<td>facility failed to properly construct fire walls.</td>
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</tbody>
</table>

The findings included:

1. Observations in the mechanical room on the first floor, on 9/17/12 at 1:16 PM, revealed the fire wall next to therapy room was not sealed at the floor.

2. Observations in the first floor storage area on 9/17/12 at 1:17 PM, revealed the fire wall was not mudded and taped at the drywall seams. The screws in the drywall were not covered.

These findings were acknowledged by the maintenance director and the facility administrator during the exit conference on 9/17/12.

<table>
<thead>
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<th>(X5) COMPLETE DATE</th>
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<td>835</td>
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<td>1200-8-6-.08 (5) Building Standards</td>
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(5) No new nursing home shall be constructed, nor shall major alterations be made to an existing nursing home without prior written approval of the department, and unless in accordance with plans and specifications approved in advance by the department. Before any new nursing home is licensed or before any alteration or expansion of a licensed nursing home can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire and life safety or functional issues, shall be prepared by or under the direction of a licensed architect and/or a licensed engineer and in accordance with the rules of the Board of Architectural and Engineering Examiners.
N 835  Continued From page 2

This Rule is not met as evidenced by:
Based on observation and staff interview, it was determined the facility failed to obtain written approval for building alterations.

The finding included:

Observations and a staff member interviews on 9/17/12 at 11:55 AM, revealed the facility was remodeling the therapy room on the second floor and plans had not been submitted to the department for approval. Work consisted of demolition and construction of walls and adding new trim.

This finding was acknowledged by the maintenance director and the facility administrator on 9/17/12.

Work on the Therapy Room was stopped. Work will resume when the department has provided written approval to the facility.

No other work of this type is currently underway.

The Leadership Team was informed on the submission of required information to the department prior to beginning a project.

Future projects will not be started until written authorization writing is obtained from the department.