Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL041030	A. BUILDING: 01 B. WING _____	R 11/22/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE HIGH POINT	201 WEST HARTLEY DRIVE HIGH POINT, NC 27265

(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 Biennial Follow Up Construction Survey by Ed Miller, conducted on November 22, 2016. The following deficiencies cited during the previous Construction Section Biennial Survey, have not been satisfactorily corrected and will require a new Plan of Correction.	{C 000}	See Attachment	
{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 keep walls, ceilings, floors or floor coverings and furniture clean and in good repair. Findings on September 7, 2016: b. Women Public Restroom - the textured ceiling around the sprinkler head was falling off the ceiling. c. Bedroom 44 - the carpet was stained.	{C 164}		
{C 166}	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	{C 166}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Dabotha Craig — TITLE: BOC — (X6) DATE: 2/8/2017

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{C 166}	Continued From page 1 (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 facility failed to maintain the building in an uncluttered, clean and orderly manner. Findings on September 7, 2016: a. Beauty Shop - the HVAC grille with their radiation damper have an excessive accumulation of dust/lint. b. Laundry - the HVAC grille with their radiation damper have an excessive accumulation of dust/lint.	{C 166}		
{C 189}	Building Equipment Maintained Safe, Operating 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. This Rule is not met as evidenced by: 1. Based on observation, the building's emergency equipment was not maintained in a safe and in operating condition. This would affect residents, staff and visitors if they could not promptly find their way to an exit during an emergency.	{C 189}		

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{C 189}	Continued From page 2 Findings on September 7, 2016: a. Cross-Corridor Doors near Bedroom 30 - the exit sign did not work on backup power when tested. Exit signs must work on backup power to provide directions during power outages. b. Library Exit Door near Bedroom 55 - the exit sign did not work on backup power when tested. Exit signs must work on backup power to provide directions during power outages. 2. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, staff and visitors to fire/smoke if not contained in Room or compartment of origin Findings on September 7, 2016: b. Sales Office - there was a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. d. Med Room - there was a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. e. Middle Attic Furnace Room - there was a hole through the fire-resistance-rated ceiling assembly near AHU #2. f. Middle Attic Furnace Room- there was a hole in the fire-resistance-rated wall assembly near the door. 3. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire extinguishing system lacked the inspections, maintenance and documentation required to ensure a properly working system. This could affect residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on September 7, 2016: a. Kitchen -Since the semi-annual maintenance	{C 189}		

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{C 189}	Continued From page 3 of the commercial kitchen hood's fire extinguishing system, there has been no record keeping of the monthly inspections. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors did not resist the passage of smoke due to the doors not positively/automatically latching into their frame under normal closing force. This could affect all residents, staff and visitors if the doors were not latched and did not contain smoke/fire in the room of origin. Findings on September 7, 2016: a. Bedroom 32 - the corridor door was missing its latch bolt and could not latch into its frame.	{C 189}		

The following is a summary of the Plan of Correction for Brookdale High Point. This Plan of Correction is in regards to the Corrective Action Report dated December 7, 2016. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.

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.

- Indicated textured ceiling will be repaired.
- Indicated carpet will be cleaned.

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.

- Indicated HVAC grills will have excess dust/lint removed.

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.

- Indicated Exit signs will be repaired/replaced.
- Gaps around designated cables in fire stopped ceilings will be repaired.
- Holes in indicated areas will be repaired.
- Monthly fire extinguishers inspections will be completed with documentation as indicated.
- Indicated corridor doors will be repaired assuring proper latching into frame.
- Indicated missing latch bolts will be repaired.

The Executive Director/Maintenance Technician will review items noted for necessary completion and/or repair, on or before 1/13/17.

The Executive Director/Maintenance Technician will do bimonthly building surveillances observing for any items that need attention/repair, assuring they are maintained in a safe operating condition for the next 3 months, and then randomly thereafter.