

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060085	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 12/29/2016
NAME OF PROVIDER OR SUPPLIER BROOKDALE SOUTH PARK		STREET ADDRESS, CITY, STATE, ZIP CODE 5326 PARK ROAD CHARLOTTE, NC 28209		
(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 Ed Miller, conducted on December 29, 2016. Deficiencies were cited which will require a plan of correction.	{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. Based on observation, the Building failed to meet NC State Building Code requirements for a delayed egress locking system. Findings on December 29, 2016: a. All Marked Exit Doors from Building- these doors are equipped with delayed egress locking. The doors are not equipped with the required visible sign on the door near the release device	C 101	Plan of Correction 02/01/2017 The following is the Plan of Correction for Brookdale South Park. This Plan of Correction is in regards to the Statement of Deficiencies dated 12/29/2016. 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. Facility to ensure that the egress on the front entrance door is in working order. To be completed by February 28 th , 2017	

Division of Health Service Regulation

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

Andrea Fitzgerald

TITLE

EXECUTIVE DIR.

(X6) DATE

2/1/17

STATE FORM

9B0523

If continuation sheet 1 of 3

Division of Health Service Regulation

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C 101	Continued From page 1 that reads "PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS", b. Front Door - this door is equipped with delayed egress locking, however did not start the process of unlocking after pushing on the door for 3 seconds.	C 101	Facility to ensure that all marked Delayed egress doors are clearly Marked with a sign that reads "Push until alarm sounds. Door Can be opened in 15 seconds"	To be completed by February 28 th , 2017
{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. This Rule is not met as evidenced by: 2-Based on observation, the facility has failed to maintain the counter-tops in service areas. Findings on 09/16/2016: Kitchen counter-tops have broken edges and laminate has come unglued that are located at the following locations: (a) Country Lane Community (b) Garden Path Community (c) Cottage Place Community (d) Boat House Community	{C 166}	Facility is in the process of a major building renovation. The renovation will consist of the replacement of all four kitchen countertops and cabinets. Due to the scope of this work, completion is not expected until later June of 2017.	To be completed by JUNE 30 th , 2017
{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	{C 199}		

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{C 199}	Continued From page 2 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-Based on observation, this facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff by subjecting them to house-keeping odors. Findings on 05/05/2016: The mechanical exhaust fans are not exhausting interior air in the following locations: (c) Mop Sink Closet in the Garden Path Community	{C 199}	Facility is in the process of a major building renovation. The renovation will consist of the replacement of facility exhaust systems. Due to the scope of this work, completion is not expected until late April of 2017. To be completed by April 30th, 2017	