

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL041033	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/27/2017
NAME OF PROVIDER OR SUPPLIER BROOKDALE HIGH POINT NORTH		STREET ADDRESS, CITY, STATE, ZIP CODE 1564 SKEET CLUB ROAD 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 Biennial Follow Up Construction Survey by Ed Miller, on June 27, 2017. Deficiencies were cited that will require a new 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 observations, the special locking did not meet the requirements of the code requirements at the time of licensure. Findings on June 27, 2017: a. Front Exit and Sun Room Exit - the key override for these exit doors are momentary switches. The switch has be in the locked position to remove the key. The doors lock back when the key is removed which could trap	{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 Residents in the facility if the door hardware fails to operate during an emergency. Per the Maintenance Director and Alarm Tech, these doors will be fixed next week. b. The kitchen exit did not release when the fire alarm was activated. Per the Maintenance Director and Alarm Tech a new power supply is on order and will be in next week.	{C 101}		
{C 111}	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have current sanitation and fire safety inspection reports. Findings on June 27, 2017: b. Records indicate that the last Fire Inspection was conducted on September 11, 2015. Per the Maintenance Director, he has requested inspection.	{C 111}		
{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;	{C 164}		

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{C 164}	Continued From page 2 (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 ceiling was not maintained in good repair. Findings on June 27, 2017: f. Mechanical Room (back hall) - there are open penetrations in the one hour ceiling assembly that are not fire caulked.	{C 164}		
{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 cross corridor doors were not maintained in a safe and operating condition. Findings on June 27, 2017: b. The front leaf of the cross corridor doors outside of Room 118 had a 3/4" gap at the top edge when closed. The foam material used as a smoke seal is not approved for fire-resistance-rated door construction	{C 189}		

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{C 189}	Continued From page 3 3. Based on observation, the mechanical exhaust system was not maintained in operating condition. Findings on June 27, 2017: a. Four of four Resident bathrooms tested using a thin plastic sheet revealed that the mechanical exhaust system was not working. Per the Maintenance Director, replacement fan motors arrived today. Motors will be replaced next week. b. In the right housekeeping closet near the sunroom, the mechanical exhaust fan was not working based on testing with a thin plastic sheet. Per the Maintenance Director, replacement fan motors arrived today. Motors will be replaced next week. c. In the left housekeeping closet near the sunroom, the exhaust fan had a heavy accumulation of dust and the cover was missing. Per the Maintenance Director, the exhaust fan and radiation damper will be cleaned next week. 4. Based on observation, three toilet fixtures were not maintained in a safe and operating condition. Findings on June 27, 2017: a. Room 02 - the tank on the Resident toilet fixture was loose and leaning against the wall. Per the Maintenance Director, this room is now vacant and is having an update, which includes replacing the toilet. Time line not established except update will be completed before occupying. Replacement toilet is located in room. 5. Based on observation, equipment was not maintained in a safe condition. Findings on June 27, 2017: a. Room 06 - an unsecured oxygen tank was	{C 189}		

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{C 189}	Continued From page 4 observed sitting on the floor in the first closet. 10. Observations revealed that the exterior facade was not maintained in good condition. Findings on June 27, 2017: a. Outside the sunroom, a portion of the exterior aluminum soffit had fallen off where the roof lines intersect. b. Outside the sunroom, a panel covering the exterior sheathing had fallen off where the roof lines intersect. 16. Based on observation, the ice machine in the kitchen was not maintained in a safe and operating condition. Findings on June 27, 2017: a. The drain line was dripping directly into the drain and did not have a minimum 1 1/2" vacuum break. Per the Maintenance Director, another drain line was adjusted.	{C 189}		
{C 169}	Building Service Equipment-Ventilation IV. The Building D. Building Service Equipment (10 NCAC 42D .1605) 7. Ventilation The spaces listed below must 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 adequate natural ventilation in these specified spaces. a. soiled linen storage; b. soil utility room; c. bathrooms and toilet rooms; d. housekeeping closet; and	{C 169}		

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{C 169}	Continued From page 5 e. laundry area. This Rule is not met as evidenced by: 1. Observations revealed that required ventilation was not provided in one space. Findings on June 27, 2017: a. Mechanical Room/Housekeeping 4 - did not have mechanical exhaust. The room contained a mop sink and had bleach and other cleaning supplies stored in the room. The chemical have been removed but the room still has an odor.	{C 169}		