STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL060042	A. BUILDING: 01 B. WING _____	04/19/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE WEDDINGTON PARK	2404 PLANTATION CENTER DRIVE MATTHEWS, NC 28105

(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 Construction Section Biennial Survey report by Frank Strickland and Billy Bryant on 04/19/2017: This facility was licensed for licensure on 08/18/1998 for 83 residents. Based on this information, we are requiring that this facility to meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 w/98 rev Edition of the North Carolina State Building Code; Section 409 Institutional Occupancy - Group I. Deficiencies have been cited and a Plan of Correction is required.	C 000		
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, this facility has 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 04/19/2017: The mechanical exhaust fans are not exhausting interior air in the following rooms/areas:	C 164		

Division of Health Service Regulation

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C 164	Continued From page 1 (a) Hall "A" (b) Kitchen Mop Sink Closet (c) Rooms 40 to 44 2-Based on observation, this facility has failed to provide to maintain the interior walls in areas subject to moisture. Findings on 04/19/2017: The sheet-rock wall is damage due to moisture migration underneath the 3-compartment sink in the Kitchen.	C 164	(4a) New motor was replaced on Exhaust fan hall A (4b) Check kitchen mop Sink Closet Vent and It is now working. (4c) Replaced Fan belt and Vents are working	5-17-17 5-17-17 5-17-17
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, this facility has failed to provide fire protection in all penetrations of the fire rated floor/ceiling assemblies. This could affect all residents, staff and visitors in an event of a fire. Findings on 04/19/2017: There are piping and electric cable penetrations above the water heater in the Basement and that penetrate the fire-rated floor/ceiling assembly that have no fire protection:	C 189	—> Caulked with fire proof caulk.	5-30-17

June 3rd

Division of Health Service Regulation

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	HAL060042	A. BUILDING: 01 B. WING _____	04/19/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE WEDDINGTON PARK	2404 PLANTATION CENTER DRIVE MATTHEWS, NC 28105

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C 189	Continued From page 2 2-Based on observation, the facility has not maintained in a safe and operating condition because the noted interior doors do not latch preventing the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire. Findings on 04/19/2017: The doors at the following locations are damaged ,out of adjustment and do not latch: (a) Avery Place Dining Room (b) Rehab Services (c) "C" Hall Electrical Room (d) Puzzle Area Exterior Door (e) Med Room 3-Based on observation, this facility has not maintained the building fire safety equipment for the containment of fire and/or smoke in the room of origin. This could affect all residents and staff in the event of a fire. Findings on 04/19/2017: The doors at the following locations have kick down type door stops installed which obstruct the door from closing and latching unless they are mechanically released by staff: (a) Kitchen/Dining Hall Door (b) Dinning Room Entry Doors	C 189 2a	will replace with a new Door	5-30-17
		2b	will replace with a new Door.	5-30-17
		2c	Door will be Adjusted to fit properly.	5-24-17
		2d	New weather stripping will be installed.	5-31-17
		2e	Door will be Adjusted to fit properly.	5-26-17
		3a	will install a floor mount magnetic stopper. I will remove current Door stop.	5-30-17
		3b	I will remove the kick down door stop.	5-26-17