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
	HAL064004	A. BUILDING: 01 B. WING _____	10/12/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BREKENRIDGE RETIREMENT CENTER	2500 HUNTER HILL ROAD ROCKY MOUNT, NC 27804

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Billy S. Bryant and Frank Strickland conducted on 10/12/2017. This facility was first licensed on 03/22/1995. The facility is currently licensed for 64 Beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1991 (1995 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1994 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	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:	C 101		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

*Pam Wans — Administrator — 11-7-17

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C 101	Continued From page 1 1. Based on observation the facility did not meet the building code requirements for Special Locking in effect at the time of construction or renovation. Finding on 10/12/2017: a. A schematic wiring diagram and system components location map for the special locking system showing was not displayed adjacent to the fire alarm panel.	C 101	Obtained a copy of the schematic wiring diagram and hung adjacent to the fire alarm system. (See Photo attached)	10/25/2017
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 building is not being kept in good repair. Finding on 10/12/2017: a. Nurses' Station - There are cracks in the gypsum board ceiling adjacent to the sky light.	C 164	Repaired gypsum board ceiling to sky light (see photo attached)	11/6/2017
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	C 166		

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C 166	Continued From page 2 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 is not maintained free from hazards. Finding on 10/12/2017: a. Main Electrical Room - The Code required clearance of 36" for access to the electrical panels is obstructed by items stored in front of the panels.	C 166	Electrical Room cleaned out (see photo attached)	10/16/2017
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 facility's fire safety equipment is not maintained in operating condition. In the event of a fire, occupants of the facility could be effected if there was a delay in water being delivered to the activated sprinkler head. Finding on 10/12/2017: a. Sprinkler Room - Pressure gages for the fire sprinkler's accelerator indicated zero pressure to	C 189	BFPE is scheduled to come on 11/10/2017 to repair the sprinkler's accelerator	

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C 189	Continued From page 3 the accelerator and valves for the accelerator piping were in the off position. 2. Based on observation the facility's fire safety equipment is not maintained in a safe operating condition. This could expose residents to fire if the fire could not be suppressed. Finding on 10/12/2017: a. Storage Room #117 - Items stored on the top shelf of the closet were not a minimum of 18" below the fire sprinkler head in the closet ceiling. 3. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Finding on 10/12/2017: a. Sprinkler Room - An approximately 18"x24" section of the fire resistant rated gypsum board ceiling has been removed to perform a repair above the ceiling. b. Sprinkler Room - There is a gap in the fire resistant rated ceiling where it is penetrated by the fire sprinkler main riser pipe. e. Room 101 - There is a gap in the fire resistant rated ceiling where the fire sprinkler head has been dislodged. d. Porte Cochere - There are gaps in the ceiling where the fire sprinkler heads have been dislodged. e. Mechanical Room 115 - There is an open ended sleeve for data cables that penetrates the	C 189	Cleaned out Storage room and put a 18" line up Re installed the 18" x24" fire resistant rated gypsum board ceiling Fire caulked around the riser pipe Repaired- Sprinkler escutcheon slid up and tightened Escutcheons orded and will be installed by Nov. 30, 2017 The sleeve was filled with fire caulk	10/23/17 10/23/2017 10/23/17 10/23/2017 10/23/2017

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C 189	Continued From page 4 fire resistant rated ceiling. 4. Based on observation the facility's fire safety equipment is not maintained in operating condition. In the event of a fire, occupants could be effected if smoke was not detected in the HVAC ductwork. Finding on 10/12/2017: a. Mechanical Room 115 - The duct detector sampling tube is clogged with dust. 5. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Finding on 10/12/2017: a. Common Bath #107 - The door to the corridor contacts the frame and cannot completely close and latch. b. 100 Hall Cross Corridor Doors - One leaf of the double doors contacts the stop at the top of the door frame and cannot completely close. c. Room #13 - The door does not latch to remain closed when shut. d. Kitchen Housekeeping Closet - The latching bolt was taped over to prevent the door from latching to remain closed when shut. Note: Corrected while the surveyor was on site. 6. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could	C 189	Cleaned duct detector Tightened the hinges; door works correctly now Trimmed top of door- door works correctly now Put a shim in the bottom hinge- door works correctly now	10/27/2017 10/17/2017 10/17/2017 10/17/2017

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C 189	Continued From page 5 effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Finding on 10/12/2017: a. The ceiling mounted emergency lights at the nurse's station did not operate when tested. 7. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection. Finding on 10/12/2017: a. Room 181 - The GFCI electrical outlet did not trip when tested.	C 189	Rapid Response Elctric is working to replace lights by November 30, 2017 A new GFCI outlet was installed	10/26/2017
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 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 the facility failed to	C 199		

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C 199	Continued From page 6 maintain the exhaust ventilation equipment in working order. Finding on 10/12/2017: a. East and South Halls - The central exhaust system for both halls was not working. b. Main Laundry - The exhaust fan is not working.	C 199	John Barnes Electric repaired all 3 (East, South & Main Laundry) exhaust fans and re-installed (see invoice)	11/1/2017