

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL025012	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/02/2017
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NAME OF PROVIDER OR SUPPLIER BROOKDALE NEW BERN	STREET ADDRESS, CITY, STATE, ZIP CODE 1336 SOUTH GLENBURNIE ROAD NEW BERN, NC 28562
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(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 Bryant, Billy Report of a Construction Section Biennial Survey by Billy S. Bryant conducted on 11/02/2017. This facility was first licensed on 07/28/1997. The facility is currently licensed for 60 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 1996 (1997 Revision Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 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

STATE FORM

6899

3KZ321

If continuation sheet 1 of 4

[Signature] *[Signature]* *Executive Director* *11/20/17*

Division of Health Service Regulation

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C 101	Continued From page 1 1. Based on observation the facility did not meet the Building Code requirements at time of construction or renovation. The N.C. Building code requires that doors equipped with locking devices unlock upon activation of smoke detection or automatic sprinkler system. Failure to maintain fire safety equipment could effect occupants of the facility if the exit the did not unlock to allow exiting in an emergency. Findings on 11/02/2017: a. 500 Hall Exit Door - At the end of the corridor, the delayed egress exit door equipped with a magnetic lock did not unlock upon activation of the fire alarm. b. Exit Door Adjacent to the Salon - The delayed egress exit door equipped with a magnetic lock did not unlock upon activation of the fire alarm.	C 101	Simplex contacted and they sent out Repairman on 11/3/2017 Service request (attached)	11/3/2017
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 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	C 189		

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C 189	Continued From page 2 doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on 02/11/2017: a. Cross Corridor Doors Adjacent to Room #101 - One leaf of the pair of fire resistant rated doors did not latch to remain shut when they were closed. b. Gallery - The pair of doors that open to the central common area did not latch to remain shut when they were closed. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on 11/02/2017: a. Director's Office - When tested on battery power the wall mounted emergency light outside the director's office did not illuminate. b. Adjacent to Room 102 - When tested on battery power only one lamp of the dual lamp wall mounted emergency light illuminated. c. Adjacent to Rooms #107, #701, #710, #711, and #810 - When tested on battery power the wall mounted emergency lights did not illuminate d. 100 Hall Salon - When tested on battery power the wall mounted emergency light did not illuminate. e. Main Mechanical Room - When tested on battery power the wall mounted emergency light did not illuminate.	C 189	Maintenance corrected door closures New batteries were installed in Emergency lights that were listed And we checked all the other lights We will check the lights monthly Invoice (attached)	11/3/2017 11/7/2017

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C 189	Continued From page 3 f. Adjacent to the Sale Manager's Office - When tested on battery power the wall mounted emergency light did not illuminate.	C 189			

Batteries + Bulbs

Sales Receipt

*** Duplicate ***

Batteries Plus Bulbs # 324

2504 M L King Jr Blvd

New Bern, NC 28562

Phone: (252) 288-5777

Fax: (252) 288-5755

Batteries Plus Bulbs #324

2504 M L King Jr Blvd

New Bern, NC 28562

(252) 288-5777

Ticket: #324-285776

Usr:

SDCOOK

Date: 11/7/2017 12:00:30 P

Sta:

324-01

Original order:

Sold to: Brookdale Senior Living
NEW BERN, NC 28562

Ship to:

Customer #: 2526386660

Sales rep: SALESREP

Phone #: 2526386660

Ship date:

Location: 324

Ship-via code:

Terms:

Item Description	Qty	Price Line type	Total
SLA6-5F 6V LEAD DURA6-5F	15	7.95 SaleLine	119.25

Item Subtotal	119.25
Tax	8.05

Total	127.30
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Tender:
MASTERCARD
XXXXXXXXXX1046
Auth: 047810
127.30

Sale amt recvd 127.30

Items purchased: 15

Sold To:

Brookdale Senior Living
NEW BERN, NC 28562

Customer PO#...

GET THE BATTERY, LIGHT BULB
AND HELPFUL ADVICE YOU NEED.
ASK ABOUT OUR BATTERY REBUILD SERVICES
FOR CORDLESS TOOLS AND MORE
VISIT US AT BATTERIESPLUS.COM

Quantity	Item #	Description	Long description
15	SLA6-5F	6V LEAD DURA6-5F	

User: SDCOOK

Total line items: 1

Sale subtotal: 119.25

Tax: 8.05

Total: 127.30

Tender:

MasterCard # XXXX1046 127.30

Customer Signature

Net tender: 127.30

GET THE BATTERY, LIGHT BULB
AND HELPFUL ADVICE YOU NEED.
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We want you to be completely satisfied with your Batteries Plus Bulbs purchase. In the event you wish to make use of our return or warranty policy, the following information reflects the policies of our product manufacturers and will help facilitate your return or warranty. Specific terms and conditions of warranty policy will vary by product type. Modifications of these policies, if applicable, will be posted in the store. For additional information please dial 1-800-677-8278 for the store nearest you.

Return Policy

- Product returns require a proof of purchase or original receipt.
- Cash or credit refunds will be given with a proof of purchase receipt up to fourteen (14) days from the date of purchase and apply to merchandise we determine to be unused and in a saleable condition.
- A check for refunds of cash purchases of more than \$20.00 may be mailed to the customer's home address.
- Refunds for purchases made by check require a ten (10) day waiting period.
- Refunds for purchases made by credit card will be credited back to the credit card used to make the purchase.

Warranty Policy

- Warranties require a proof of purchase or original receipt.
- Product warranty applies to the original purchaser. Warranties are non-transferable.
- It is Batteries Plus policy to honor warranty claims within the warranty periods, however:
- Warranty claims will not be accepted on products that are defective due to owner abuse or neglect.
- Warranty claims will not be accepted on products that are defective due to use in applications for which products are not intended.
- A warranty claim may require product analysis by Batteries Plus Bulbs personnel prior to issuance of credit/replacement. This process may take up to twenty-four (24) hours.

SERVICE REQUEST

FORWARD TO YOUR ACCOUNTS PAYABLE DEPARTMENT

License #		TR#	124255	SMITH, MARK B
Project #	99999996	Task/SR#	58697693	40397910

NAME		Brookdale New Bern #03290				CUSTOMER PO		
ADDRESS (OR ATTENTION OF)		1336 S Glenburnie Rd NEW BERN, NC 28562-2624				LABOR-REG	LABOR-OT	LABOR-DT
						3	0	0
TR ARRIVAL DATE	BILL	NON-BILL	SERV. COMPL	CUSTOMER NUMBER	NAT. ACCT.	PHONE		INSP-MONTH
03-NOV-2017 15:37:27				250-00693662	Y			

NAME(BILL TO)		Brookdale New Bern #03290		LABOR-REG	LABOR-OT	ARRIVAL
ADDRESS		1336 S Glenburnie Rd		3	0	03-NOV-2017 15:37:27
CITY	STATE	ZIP		MILES		DEPART
NEW BERN	NC	28562-2624				03-NOV-2017 20:03:37

I authorize SimplexGrinnell to proceed with the work as agreed to and outlined below:

Signature will be obtained at completion
 (Preauthorization Customer Signature)

03-NOV-2017 20:03:37
 Date

PAYMENT TERMS					
TIME AND MATERIAL		PRICE NTE	1500	FIXED PRICE	
DEPOSIT (\$)		BALANCE DUE(\$)		BILLABLE	

SCOPE OF WORK/PROBLEM CODE	General Service
WORK PERFORMED/RESOLUTION CODE	The customer stated that three doors were not activating the intercom system. We checked the Beauty Shop door and it operated properly. We checked the 500 hallway door and it operated properly. We checked the 300 hallway door and it did not activate the intercom system. Upon investigation, we determined that the door contact was faulty. We need to order a new door contact to correct the issue.

PRODUCT ID	QTY	DESCRIPTION	COM
SYSTEM TYPE	AC	CONTACT NAME	Jim Budziak

IMPORTANT NOTICE TO THE CUSTOMER

Customer acknowledges and agrees to the terms and conditions on the reverse side of this Service Request, agrees that the services have been completed to Customer's satisfaction and the system is in good working order and repair, unless services performed were of a temporary nature, in which case Customer acknowledges that part of customer's system may have been bypassed or is otherwise Inoperable until service can be completed.

CUSTOMER'S ACTION IS DIRECTED TO THE LIMITATION OF LIABILITY, WARRANTY, INDEMNITY AND OTHER CONDITIONS ON THE REVERSE SIDE.

Additional charges may apply if a return trip is required

CUSTOMER ACCEPTANCE

[Signature]