PRINTED: 02/07/2018
FORM APPROVED

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
	HAL034027	A. BUILDING: 01 B. WING	R 01/10/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE WINSTON-SALEM	275 SOUTH PEACE HAVEN ROAD WINSTON SALEM, NC 27104

(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 by Suzanna Fay conducted on January 10, 2018. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	(C 000)	The following is a summary of the Plan of Correction for Brookdale Winston-Salem. This Plan of Correction is in regards to the Corrective Action Report dated February 7, 2018. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusion 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.	
(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 facilities locking system did not meet the licensure and code requirements in effect at the time of construction or alteration. Findings on January 10, 2018: a. The facility had a maglock on the front entry door and at the enclosed courtyard gate. The facility did not have a master override switch for	(C 101)	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	

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

Tori Darling-Betsworth, Executive Director 2/15/2018

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(C 101)	Continued From page 1 these two doors. Interview with staff revealed that the switch has been ordered and will be installed as soon as the vendor receives the item. b. The facility did not have a locking diagram posted at the fire alarm panel. Interview with staff revealed that the vendor completing the key switch will provide the locking diagram.	(C 101)	any licensed facility where 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, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost;	02/22/2018
(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. Observations revealed that the ceilings were not kept clean and in good repair. Findings on January 10, 2018: a. B Hall exit corridor - the HVAC supply vent has water damage around the vent and black mildew spots are forming in the water stains. Interview with staff revealed that there are two exit corridors on the B hall and they had checked the wrong one. The previous maintenance person had indicated that this was corrected.	(C 164)	* Identified Mag Lock doors will have master override switches installed. * Missing locking diagram at indicated Fire Panel will be posted. 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. *Identified HVAC supply vents will be cleaned and in good repair.	02/08/2018

Tori Darling-Behrendt, Executive Director 2/15/2018