STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011035	A. BUILDING: **01** B. WING _____	**07/12/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE ASHEVILLE WALDEN RIDGE	**4 WALDEN RIDGE DRIVE ASHEVILLE, NC 28803**

(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 Construction Section Biennial Survey by Dennis Harrell on 7-12-2019. Records indicate this facility was first licensed on 7-30-1998, for the licensed capacity of 38 residents. Based on this information, the facility is required to meet the 1996 Rules for Homes for the Aged and Disabled - Minimum Standards and Regulations, applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the applicable portions of the 1996 North Carolina State Building Code, Volume I General Construction, Section 409.1, Group I - Unrestrained.	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: Based on observation, a Delayed Egress door	C 101		

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C 101	Continued From page 1 would not release and open as required by the NC State Building Code. The Code requires Delayed Egress exits to initiate the process to release and open when a force of not more than 15 pounds is applied to the door. Findings on 7-12-2019; The Delayed Egress exit from the service corridor is a required exit and would not initiate and open after a force in excess of 100 pounds was applied.	C 101		
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: Based on observation, the building was not kept in good repair. Finding on 7-12-2019: Part of the baseboard was missing in the beauty salon.	C 164		
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 hose on the shower wand in the Beauty Salon was long enough to reach the sink basin and there was no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixture present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed. 2. Based on observation, an extension cord was being used in place of permanent wiring in a space off the service corridor. The cord was plugged inside a storage room and extended through a doorway to a refrigerator for employee use. Extension cords are intended for temporary use only and must never pass through a doorway. 3. Based on observation, there was a wasp nest on the ceiling of the screened in porch at the courtyard.	C 166		
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)	C 189		

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C 189	Continued From page 3 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the nurse call system was showing a "System Trouble" condition. Call systems in "System Trouble" may fail to operate properly when needed. 2. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings on 7-12-2019: a. Holes around a ceiling register not properly mounted in the housekeeping closet on D Hall, b. Unsealed penetration in the ceiling of the activity closet off the C-D living room, c. Unsealed penetration in the ceiling of the HVAC closet on B Hall, d. Hole in the ceiling by a junction box cover in the exterior storage room off B Hall. e. Hole in the wall of the shower in the spa on B Hall. 3. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings on 7-12-2019; a. There was a hole at the latchset through the door to room D1. b. There was a hole at the latchset through the door to room C1.	C 189		

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C 189	Continued From page 4 c. There was a hole at the latchset through the door to room C5. d. There was a hole at the latchset through the door to room B6 e. There was a hole at the latchset through the door to the Business Office Co-ordinator. f. The door to room D4 was damaged at the latchset. g. The latchset knob was very loose on the door to room C2, h. The latchset knob was very loose on the door to the C Hall Spa. i. The latchset knob was very loose on the door to the Program Co-ordinator's office. 4. Based on observation, the floor covering was loosely attached to the floor in the exit hallway from C Hall West. The loose floor covering presented a trip and fall hazard. 5. Based on observation, the condensate drain was clogged and overflowing in the HVAC closet on A Hall.	C 189		