

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL064004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/02/2019
NAME OF PROVIDER OR SUPPLIER BREKENRIDGE RETIREMENT CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 2500 HUNTER HILL ROAD ROCKY MOUNT, NC 27804		
(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 Construction Section Biennial Survey by Suzanna Fay conducted on October 2, 2019. This facility was first licensed on March 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 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 furnishings were not kept in good repair. Findings on October 2, 2019: a. Administrator Two's Office - the door veneer is splintered and breaking off along the bottom strike side and along the lower part of the hinge side. b. Room 123 - the bathroom door is heavily	C 164		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 164	Continued From page 1 gouged and the veneer is breaking off about 18" above the floor from an electric wheelchair. c. Room 187 - the veneer on the bathroom door is splitting and buckling down the middle of the door. 2. Observations revealed that the ceilings were not kept clean and in good repair. Findings on October 2, 2019: a. Room 111 - the ceiling near the closets is damp and bubbling and there is a twelve inch long split in the finish at the joint line. b. The A/C grille outside of Room 117 has a heavy accumulation of dust. c. Janitor Closet 145 - the exhaust fan has an excessive accumulation of dust and dirt.	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 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 was not maintained free from hazards. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on October 2, 2019:	C 166		

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C 166	Continued From page 2 a. RN Office - there was one unsecured oxygen bottle on the floor. This was corrected at the time of survey.	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) 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 building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings or walls could allow fire and smoke to spread beyond the area of origin. Findings on October 2, 2019: a. Registered Nurse's Office - the sprinkler escutcheon plate has dropped on the sprinkler head near the front door leaving a gap in the rated ceiling assembly. b. There is a small hole in the ceiling at the base of the exit sign in the corridor by Room 117. c. Attic above Room 117 - there is a 2" hole through the smoke wall in the attic where two camera cables were run. d. Room 102 - the escutcheon plate on the sprinkler head has dropped leaving a gap in the rated ceiling assembly.	C 189		

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C 189	Continued From page 3 e. Soiled Linen - the escutcheon plate on the sprinkler head has dropped leaving a gap in the rated ceiling assembly. f. Soiled Linen - there is a 24"x24" patch on the ceiling. The patch is not acceptable as the edges are not sealed. g. Room 164 - the escutcheon plate on the sprinkler head has dropped leaving a gap in the rated ceiling assembly. 2. 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. Findings on October 2, 2019: a. Registered Nurse's Office - the latch is jammed on the first door and the door will not latch. b. Room 105 - the corridor door drags on frame requiring excessive force to close and the door hardware is loose. c. Activity Room (West Hall) - the corridor door drags on the frame requiring excessive force to close. 3. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Findings on October 2, 2019 a. South Hall Mechanical Room - the sampling tube in Unit E had a coating of dust. 4. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved	C 189		

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C 189	Continued From page 4 device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on October 2, 2019: a. Feeding Room - there was a mat on the floor at the door preventing the door from closing. b. Room 182 - the corridor door was held open with a rubber wedge. c. Room 155 (West Hall) - the corridor door was propped in an open position using a trash can. 5. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain 18" clearance below the sprinkler heads creates an obstruction which limits the ability of the sprinkler system to suppress a fire. Findings on October 2, 2019: a. Room 111 - items in closet were stored to the ceiling. (Note: this is a typical condition for the South Hall.) 6. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Use of materials that are not fire resistant rated could allow fire and smoke to spread beyond the area of origin. Findings on October 2, 2019: a. Exterior Mechanical Room - orange foam was used to seal electrical conduit penetrations at the side wall and the back wall (one conduit.) The wall at the back where the conduit penetrates is damaged leaving holes in the rated wall around the conduit.	C 189		

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C 189	Continued From page 5 7. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on October 2, 2019: a. Room 165 (West Hall) - the cover plate for the electrical outlet behind the door was missing.	C 189		
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. Observations revealed that the facility did not provide working exhaust ventilation in required areas. Findings on October 2, 2019: a. Visitor Men's Toilet - the exhaust fan is not working. b. Room 113 Toilet - the exhaust fan is not working. c. Room 179 Toilet - the exhaust fan is not	C 199		

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C 199	Continued From page 6 working. d. Employee Break Room Toilets - the exhaust fans are not working.	C 199		