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
	HAL049019	A. BUILDING: 01 B. WING _____	10/02/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE EAST BROAD	2441 EAST BROAD STREET STATESVILLE, NC 28677

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on October 2, 2019. Records indicate this Facility was first licensed on 5-21-1990, for 40 resident beds and an additional 18 beds on 1-13-1992, increasing the total to 58 beds. Based on this information, the facility is required to meet the 1987 Minimum and Desired Standards and Regulations for the Licensing of Adult Care Homes, applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds, and the 1978 North Carolina State Building Codes (Rev 9 and 10), Section 409.1(c)-Institutional (I) Occupancy- Unrestrained. Deficiencies were cited that require a Plan of Correction.	C 000	The following is a summary of the Plan of Correction for Brookdale East Broad. This Plan of Correction is in regards to the Statement of Deficiencies dated October 2, 2019. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions 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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, the Building does not meet the code requirements in effect at the time of initial Licensing or alteration, by not providing all required exits or exit access doors. This could affect residents, staff, and visitors by not providing egress directions for a prompt evacuation of the building. Findings on October 2, 2019: a. Dining - this room has an occupant load greater than 50. Therefore, this room requires two means of egress. The back exit door's lock is installed backwards. When this device is locked, egress from Dining through this door, without the key, is impossible.	C 101	* Designated door was replaced to provide egress direction for a prompt evacuation of the building on Oct 3. * Executive Director or Designee will inspect periodically during walking rounds to ensure compliance.	10/3/19
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, and interview with Assistant Executive Director and Maintenance Director the facility has unresolved deficiencies cited on their current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on October 2, 2019: a. The last annual Fire Sprinkler System Inspection, Testing, and Maintenance in accordance with NFPA 25, available for review, performed in January 22, 2019, listed several	C 111	* Quote obtained on 10/16/19 from vendor to have repairs completed from annual sprinkler inspection. * Executive Director or Designee to review inspection reports and ensure deficiencies are resolved.	11/17/19

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C 111	Continued From page 2 deficiencies. Review the list and have the required deficiencies corrected.	C 111		
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, and interview with Manager, the facility failed to keep plumbing system devices in good repair. Findings on October 2, 2019: a. Spa - the connection of the commode to the floor is loose. b. Spa - the commode seat was loose.	C 164	* Connection of the commode to floor and commode seat in Spa Room were repaired on Oct 3. * Executive Director or Designee will inspect periodically during walking rounds to ensure compliance.	10/3/19
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.	C 166	* Oxygen cylinders will be securely placed in approved racks/stands. This was corrected on Oct 4th. * Executive Director or Designee will inspect periodically during walking rounds to ensure compliance.	10/4/19

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C 166	Continued From page 3 This Rule is not met as evidenced by: 1. Based on Observation, the Building was not maintained free of hazards, if compress gas cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on September 26, 2019: a. Bedroom 14 - eight portable medical oxygen cylinders are standing up on the floor in a plastic crate not physically secured in racks, stands or chained to the structure. b. Nurse Station - three portable medical oxygen cylinders are standing up on the floor not physically secured in racks, stands or chained to the structure. c. Activity - three portable medical oxygen cylinders are standing up on the floor not physically secured in racks, stands or chained to the structure.	C 166		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks, bathrooms and outside of building with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on October 2, 2019: a. Kitchen - an electrical power receptacle is within six feet of a sink and is not ground fault protected.	C 188	* Electrical power receptacle was replaced with ground fault protected receptacle in Kitchen and Basement Kitchen on October 11th. * Executive Director or Designee will inspect periodically during walking rounds to ensure compliance.	10/11/19

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C 188	Continued From page 4 b. Basement Kitchen - an electrical power receptacle is within six feet of a sink and is not ground fault protected.	C 188		
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 failed to maintain the electrical system in a safe and operating condition. Findings on October 2, 2019: a. Bulk Laundry - boxes are stored in front of the electrical panel, limiting the required 36-inches by 30-inches minimum clear working space. b. Bedroom 2 Bathroom - the ground-fault circuit-interrupter (GFCI) electrical power receptacle does not trip when its test button is pushed or when tested with a ground fault receptacle tester & circuit analyzer. 2. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on October 2, 2019: a. Bedroom 22 Bathroom - there is a cable not	C 189	* Boxes were removed from in front of electrical panels on Oct 2nd. * Electrical power receptacle was replaced on October 3rd. * All areas noted during survey as needing firestopped were corrected on Oct 3rd. * Items were removed to meet the minimum clearance in service hall, clean linen room, and dietary supply closet on Oct 3rd. * All doors noted during survey have been repaired to ensure they latch and are in safe and operating condition. * Trash can was removed from area on Oct 2nd. * Executive Director or Designee will inspect these areas periodically, during walking rounds to ensure compliance.	10/2/19 10/3/19 10/3/19 10/3/19 10/11/19 10/2/19

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C 189	Continued From page 5 firestopped as it penetrates the fire-resistance-rated ceiling assembly. b. Bedroom 22 Corridor Side Closet - there is a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly and corridor wall. c. Basement Riser Room - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly. d. Basement Mech Room - there are two holes not firestopped as they penetrate the fire-resistance-rated ceiling assembly. 3. Based on observations, the Building is not being maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler discharge pattern cannot reach all areas of a room. Findings on October 2, 2019: a. Service Hall Clean Linen - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. b. Dietary Supply Closet - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. 4. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on October 2, 2019: a. Bedroom 13 - the corridor door hits its frame and requires more than normal effect and force close and latch the door. b. Nurse Storage across from Bedroom 22 - the corridor door is missing its latch bolt; therefore, the door cannot latch to its frame. c. Bedroom 24 - the corridor door does not latch into its frame when closed.	C 189		

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C 189	Continued From page 6 5. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on October 2, 2019: a. Bulk Laundry - the corridor door has a trashcan holding the door open.	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. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in rooms required to be mechanically exhausted. Findings on October 2, 2019: a. Entire Building - the required exhaust	C 199	* Exhaust ventilation system will be repaired by the Maintenance Tech or designee in required areas. Replacement parts were ordered on Oct 2nd and will be installed upon delivery.	11/17/19

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C 199	Continued From page 7 ventilation system does not work. The facility has known about the fan not operating and had obtained a price on 32 fans this morning.	C 199		