

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060101	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 11/15/2019
NAME OF PROVIDER OR SUPPLIER BROOKDALE SOUTH CHARLOTTE		STREET ADDRESS, CITY, STATE, ZIP CODE 5515 REA ROAD CHARLOTTE, NC 28226		
(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 Ed Miller, conducted on November 15, 2019. Deficiencies were cited that will require a new Plan of Correction.	{C 000}	This plan of correction is in regards to the Statement of Deficiencies dated 11/15/19. This plan of correction is not to be construed as an admission of or agreement with the findings and the 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.	1/16/20
{C 160}	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 2. Observations revealed that the fence around the premises was not maintained free of hazards. Findings on November 15, 2019: a. The fence around the chiller was leaning and the gate did not appear to be operable. Do to usual cold and wet weather the fence repair has been delayed.	{C 160}		
{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;	{C 164}		

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

TITLE

(X6) DATE

Tim Schick

Operations Specialist

12/7/19

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{C 164}	Continued From page 1 (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the furnishings are not kept in good repair. Findings on November 15, 2019: bb. Room 317 - the door to the corridor is missing its strike plate. 3. 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 November 15, 2019: aa. Kitchen Service Hall Entrance - the corridor door has a mechanical kick down holder holding the door open. bb. Employee Half Bathroom near Kitchen - the corridor door has a trash can holding the door open. cc. Half Bathroom near Live Enrichment Office - the corridor door has a wedge holding the door open.	{C 164}	bb. Strike plate was installed immediately after the conclusion of the follow up inspection - 11/15/19. aa. Mechanical kick down holder removed on 11/15/19. bb. Trash can removed from doorway on 11/15/19. Staff training on fire doors to occur on 12/6/19. cc. Wedge removed on 11/15/19. Staff training on fire doors to occur on 12/10/19.	11/15/19 11/15/19 11/15/19 12/10/19
{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	{C 189}		

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{C 189}	Continued From page 2 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 failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be effected if the equipment failed to alert the occupants in case of a fire. Findings on September 19, 2019: a. At the time of the survey, the fire alarm panel was indicating trouble on the system. The fire alarm vendor was on site trying to repair the issue. A fire alarm spot test was conducted and all systems responded correctly. Findings on November 15, 2019: aa. Based of observation and interview with Executive Director and Maintenance Director - revealed that the fire alarm panel is still in trouble and though the Fire Alarm panel was replaced a power supply will need to be replaced. A quote has been received. 4. 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 November 15, 2019: aa. Residential Laundry by Room 324 - there is a gap that the stop on the doorframe cannot cover.	{C 189}	aa. Panel Repaired on 12/13/19 aa. Gap on door frame was repaired on 11/15/19.	12/13/19 11/15/19

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