

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034069	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 07/19/2023
NAME OF PROVIDER OR SUPPLIER THE BRADFORD VILLAGE OF KERNERSVILLE		STREET ADDRESS, CITY, STATE, ZIP CODE 602 PINEY GROVE ROAD KERNERSVILLE, NC 27284		
(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 and Tod Hancock conducted on July 19, 2023. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{C 000}		
{C 181}	Fac. Licensed Before 1/1/1984, Fire Alarm Sys SECTION .0300 - PHYSICAL PLANT 10a NCAC 13F .0307 FIRE ALARM SYSTEM (c) In a facility licensed before April 1, 1984 and constructed prior to January 1, 1975, the building, in addition to meeting the requirements of the North Carolina State Building Code in effect at the time the building was constructed, shall be provided with the following: (1) A fire alarm system with pull stations within five feet of each exit and sounding devices which are audible throughout the building; (2) Products of combustion (smoke) U/L listed detectors in all corridors. The detectors shall be no more than 60 feet from each other and no more than 30 feet from any end wall; (3) Heat detectors or products of combustion detectors in all storage rooms, kitchens, living rooms, dining rooms and laundries; (4) All detection systems interconnected with the fire alarm system; and (5) Emergency power for the fire alarm system, heat detection system, and products of combustion detection with automatic start generator or trickle charge battery system capable of operating the fire alarm systems for 24 hours and able to sound the alarm for five minutes at the end of that time. Emergency egress lights and exit signs shall be powered from an automatic start generator or a U/L approved trickle charge battery system capable	{C 181}		

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

TITLE

(X6) DATE

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{C 181}	Continued From page 1 of operation for 1-1/2 hours when normal power fails. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide a complete fire alarm system for a facility licensed before April 1, 1984, and constructed prior to January 1, 1975, the building, in addition to meeting the requirements of the North Carolina State Building Code in effect at the time the building was constructed, shall be provided with the following, Heat detectors or products of combustion detectors in all storage rooms, kitchens, living rooms, dining rooms and laundries. Findings on July 19, 2023: a. Storage Rooms Outside of Kitchen's Back Door - there were no fire detecting devices (heat or smoke detectors connected to the existing fire alarm system) provided in these rooms. Interview with staff revealed that this was more extensive than originally thought and are working with the vendor to resolve.	{C 181}		
{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.	{C 189}		

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{C 189}	Continued From page 2 This Rule is not met as evidenced by: 2. Based on observation, the building is not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier do not close completely on their own power and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on July 19, 2023: a. Smoke Barrier near Kitchen- the back leaf, of the cross-corridor doors hits the frame and does not close when the doors were released. 3. Based on observations, the building fire safety is not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on July 19, 2023: a. Laundry - there were holes in the ceiling where cables penetrate near the laundry door. There was one unsealed penetration in the corridor wall of the Soiled Linen Room. c. Nurse Station Office - there was a hole with a cable not sealed as it penetrates the wall. 4. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on July 19, 2023: a. Beauty Shop - the corridor door requires extra effort to close and open the door, once it is in its frame. Sanding was done on the side of the door but it is also rubbing along the top.	{C 189}		