

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL090022	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 05/23/2023
NAME OF PROVIDER OR SUPPLIER BROOKDALE MONROE SQUARE 2		STREET ADDRESS, CITY, STATE, ZIP CODE 919 FITZGERALD STREET MONROE, NC 28112		
(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 conducted on May 23, 2023. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected and one new deficiency has been added.	{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: New Deficiency: 1. Observations revealed that the facility is not in compliance with code requirements in effect at the time of construction or alteration. Delayed egress doors shall have a sign provided on the door located above and within 12 inches of the release device reading:	{C 101}		

Division of Health Service Regulation

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

Bobby E. Dillard

TITLE

Executive Director

(X6) DATE

8/16/23

Division of Health Service Regulation

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{C 101}	Continued From page 1 PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS. Findings on May 23, 2023: a. Yellow Hall - the exit door was not labeled with the proper signage.	{C 101}	Delayed Egress sign posted on new door in yellow hall exit that was recently installed on 5/24/23.	5/24/23
{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 maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings on May 23, 2023: a. At the time of the follow up survey, the fans on the Green Hall are not working.	{C 199}	Attic fan motor was replaced and units were working as of 7/11/23 and we were monitoring them monthly for proper functionality. Testing has deemed fans are not working again and a work order has been placed again for repair/replacement.	10/1/23