STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL064008	A. BUILDING: **01** B. WING _____	R **09/06/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE ROCKY MOUNT	**650 GOLDROCK ROAD ROCKY MOUNT, NC 27804**

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{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on September 6, 2023. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected. New deficiencies have 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: 1. Observations revealed that the facility does not meet licensure and code requirements in effect at the time of construction, renovation or alteration. For delayed egress doors signs shall be provided on the door adjacent to the release device which read: PUSH. THIS DOOR WILL OPEN IN 15 SECONDS. ALARM WILL SOUND. Sign letters shall be at least 1 inch high.	{C 101}		

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{C 101}	Continued From page 1 Findings on September 6, 2023: a. Main Entry door - the door did not have a sign indicating it was delayed egress. b. The exit door on the 800 Hall did not have a door sign indicating it was delayed egress.	{C 101}		
{C 156}	Soil Utility Room SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (j) Soil Utility Room. A separate room shall be provided and equipped for the cleaning and sanitizing of bed pans and shall have handwashing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the facility did not provide a separate room equipped for the cleaning and sanitizing of bed pans with handwashing facilities. Findings on September 6, 2023: a. Soiled Utility Room - the water for the sink for the sanitizing of bed pans has been disconnected so that the sink is no longer functional. The bowl has a thick gray residue around the drain.	{C 156}		
{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;	{C 160}		

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{C 160}	Continued From page 2 This Rule is not met as evidenced by: 1. Observations revealed that the outside grounds were not maintained in a clean and safe condition. Findings on September 6, 2023: a. 800 Hall exit - a four foot section of the gable fascia trim has fallen off leaving the untreated wood exposed. b. 800 Hall exit - a 30" section of the soffit material has pulled loose along the bottom left of the gable end leaving gaps for pests to enter the facility.	{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; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 2. Observations revealed that the ceilings were not kept in good repair. Findings on September 6, 2023: b. Mechanical Room 408 - there is some damage around the sprinkler head. There is a small gap between the head and ceiling and the finish is peeling back from the opening.	{C 164}		

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{C 189}	Continued From page 3	{C 189}		
{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 did not maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be effected if the signs indicating exit paths could not be seen in the event of an emergency evacuation. New Deficiency: a. The exit sign over the interior Dining Room door has been removed. 2. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could effect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on September 6, 2023: a. Two of the exterior emergency lights at the exits did not illuminate on test. New Deficiency: b. The emergency light by Room 404 did not illuminate on test.	{C 189}		

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{C 189}	Continued From page 4 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be effected if the fire resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on September 6, 2023: b. The left hand corridor door by the Beauty Salon rubs on the other door and does not completely close when activated by the fire alarm. 4. 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 could allow fire and smoke to spread beyond the area of origin. Findings on September 6, 2023: d. Laundry Room (commercial dryer) there is one unsealed penetrations in the corner of the ceiling. e. Storage at Laundry - there are three small holes in the ceiling where a light fixture was replaced. f. Room 706 - the escutcheon ring has dropped leaving a gap in the fire resistant rated ceiling. g. Typical - there is a pattern of dropped sprinkler escutcheons leaving gaps in the fire resistant rated ceiling. h. Room 205 Bath - there is a small gap in the ceiling at the base of the surface mounted lamp. i. Kitchen Pantry - there is one unsealed penetration by the door. 4. Observations revealed that the fire safety, electrical and plumbing equipment were not maintained in a safe and operating condition. Open junction boxes with exposed wires create a	{C 189}		

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{C 189}	Continued From page 5 possible shock hazard. Findings on September 6, 2023: a. Riser/Water Heater Room - there were several junction boxes to the hot water recirculating pumps not protected with cover plates leaving wires exposed. The temperature control panels were off on the water heaters. 5. 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 September 6, 2023: a. Laundry - the corridor door hits at the top of the frame and does not close and latch. 6. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could effect occupants of the facility if the equipment did not operate during a fire. Findings on September 6, 2023: New Deficiency: d. 500 Hall - the smoke detector on the back hall was removed to complete repairs and has not been replaced. 7. 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.	{C 189}		

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{C 189}	Continued From page 6 Findings on September 6, 2023: a. 200 Hall Kitchen Storage - boxes of disposable service ware were stacked within 18" of the ceiling.	{C 189}		