

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL001024	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 11/01/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

BROOKDALE BURLINGTON AL (NC)

**3615 SOUTH MEBANE STREET
BURLINGTON, NC 27215**

(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 Construction Section Biennial Survey by Tod Hancock, conducted on November 1, 2023. Records indicate that this facility was first licensed or submitted on October 27, 1997, as a Home for the Aged. The facility is currently licensed for 84 beds. Therefore, the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1996 North Carolina State Building Code(s), Group I Occupancy and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited that require a Plan of Correction.	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	C 101		

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

6899

OPHE21

If continuation sheet 1 of 4

Catherine Almon

Campus Director

1-3-24

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C 101	Continued From page 1 Health Service Regulation at no cost; This Rule is not met as evidenced by: 1. Based on observation, and interview with Maintenance Director, the facility failed to meet the Code requirements in effect at the time of construction or alteration by not having all the components required to comply and properly operate doors equipped with Special Locking. This could affect all occupants who need to evacuate through the door(s). Findings November 1, 2023: a. East Hall- The Special Locking system does not have a wiring diagram and a system component's location map posted under glass at the Fire Alarm Control Panel (FACP). b. The Special Locking system main override is not labeled.	C 101		
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 staff, the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this rule. Findings November 1, 2023: a. There were no records available to indicate the	C 111	<i>This has been completed on 12-22-23.</i> <i>This has been completed on 12-22-23.</i>	

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C 189	Continued From page 3 maintain its fire safety components in a safe and operational manner. Findings on November 1, 2023: a. Center East Hall/ Mechanical Room- The Emergency lights did not illuminate when tested. 2. Based on observation, the smoke-tight doors are not maintained in a safe and operating condition. Findings November 1, 2023: a. Health & Wellness Office- The door to the Mechanical room is missing the doorknob.	C 189	This was completed on 12-22-23. (door knobs) This was Replaced 12-29-23.		

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C 111	Continued From page 2 Fire Alarm system had been inspected. b. There were no records available to indicate that the Sprinkler system had been inspected.	C 111	The community has Records on file Inspection was Completed 9-26-23. Fire Alarm was Inspected on 9-22-23. This was completed 12-8-23.	
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 is not maintaining the electrical components located near a water source in a safe manner. Findings on November 1, 2023: a. Laundry- There are multiple receptacles behind the washing machines that did not trip on test indicating the lack of ground fault protection.	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, this facility has failed to	C 189		