STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL013019	A. BUILDING: **01** B. WING _____	R **12/20/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE CONCORD PARKWAY	**2452 ROCK HILL CHURCH ROAD NW CONCORD, NC 28027**

(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 December 20, 2023. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	{C 000}	The following is the Plan of Correction for Brookdale Concord Parkway. This Plan of Correction is in regards to the State of Deficiencies dated 12/2-/2023. This plan of correction is not to be construed as an admission or agreement with the findings and conclusion in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as a 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 provided.	
{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 is not in compliance with code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. Delayed egress doors shall have a sign provided on the door located above and within 12 inches of the release device reading: PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS.	{C 101}		

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{C 101}	Continued From page 1 Findings on December 20, 2023: AL Building: a. Bistro - the exterior doors leading to the side porch are delayed egress and the posted sign does not meet the requirements of the NCSBC. There is a paper sign that reads, "Alarm will sound for 15 second." New Deficiency: Memory Care Building b. The courtyard gate is a delayed egress locking system and there is not a sign posted on the gate stating, "PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS."	{C 101}	Temporary signage is in place. Permanent signage has been ordered. A door decal for the bistro and a permanent sign for the courtyard gate.	
{C 116}	Plans Submittals and Approvals SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0304 PLANS AND SPECIFICATIONS (a) When construction or remodeling of an adult care home is planned, two copies of Construction Documents and specifications shall be submitted by the applicant or appointed representative to the Division for review and approval. As a preliminary step to avoid last minute difficulty with final plan approval, Schematic Design Drawings and Design Development Drawings may be submitted for approval prior to the required submission of Construction Documents. (b) Approval of Construction Documents and specifications shall be obtained from the Division prior to licensure. Approval of Construction Documents shall expire after one year unless a building permit for the construction has been obtained. (c) If an approval expires, renewed approval shall be issued by the Division, provided revised	{C 116}		

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{C 116}	Continued From page 2 Construction Documents meeting all current regulations, codes and standards are submitted by the applicant or appointed representative and reviewed by the Division. (d) Any changes made during construction shall require the approval of the Division to assure that licensing requirements are maintained. (e) Completed construction or remodeling shall conform to the requirements of this Section including the operation of all building systems and shall be approved in writing by the Division prior to licensure or occupancy. Within 90 days following licensure, the owner or licensee shall submit documentation to the Division that "as built" drawings have been received from the builder. (f) The applicant or designated agent shall notify the Division when actual construction or remodeling starts and at points when construction is 50 percent, 75 percent and 90 percent complete and upon final completion. This Rule is not met as evidenced by: 1. Review of records revealed that the facility made revisions to the Memory Care Unity locking system and did not submit plans to the Division of Health Service Regulation/Construction section for review and approval. Findings on December 20, 2023: Memory Care Building: a. The response to the Statement of Deficiencies for an October 6, 2022 complaint revealed that the facility changed from an electromagnetic locking system to a delayed egress system on November 14, 2022. Plans were not submitted to DHSR/Construction for review in regard to the change in the locking system.	{C 116}	Key pads were replaced during the install of the new security system. See attached.	

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{C 160}	Continued From page 3	{C 160}		
{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: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on December 20, 2023: AL Building: b. Med Room Porch - the bottom section of the aluminum trim at the right side of the porch was off.	{C 160}	Work to be completed by 4/15/24.	
{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: 1. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair.	{C 164}		

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{C 164}	Continued From page 4 Findings on December 20, 2023: AL Building: b. B Hall Spa - the threshold is missing at the door and the vinyl flooring in front of the door is buckling creating a trip hazard. Interview with staff revealed that new flooring was approved by Corporate and will be installed in January. c. A Hall Housekeeping - the patch on the wall below the chemical dispensers is not holding and a 4" chunk of the patching material has fallen off. d. Kitchen - the R/A grille over the dishwashing area has a heavy residue of grease. e. Wellness Office - the ceiling is damaged around the supply vent. f. C Hall Staff Bath - the vinyl floor is buckling and pulling away from the walls. Interview with staff revealed that new flooring was approved by Corporate and will be installed in January. Memory Care Building: j. Left Spa - there is a ding in the wall behind the door where the door handle has again damaged the sheetrock.	{C 164}	B. New threshold installed. C. Wall has been repatched. D. R/A grille was removed an cleaned E. Portion of popcorn celing was scraped, smoothed, and repainted. F. Quotes obtained from Sherwin Williams and new flooring scheduled for second quarter of 2024. J. Ding has been repaired with stop plate behind the door handle to prevent further damge.	
{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 5 This Rule is not met as evidenced by: 2. 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 or walls could allow fire and smoke to spread beyond the area of origin. Findings on December 20, 2023: AL Building: c. Dining - equipment was removed over the beverage counter leaving unsealed ceiling penetrations. d. Kitchen - equipment was removed over the dishwashing area leaving unsealed ceiling penetrations. e. Med Room Porch - there is a hole at the sprinkler head near the Med Room door allowing pests to enter the facility. g. Main Laundry - the ducts for the commercial dryers do not have collars and the fire caulk is pulling away from the ceiling leaving gaps in the fire resistant rated ceiling. New Deficiency: h. Kitchen - there is a leak above the ceiling at the dishwashing area. There is a 6" diameter black stain on the ceiling. Memory Care/SCU: a. Telephone Room off of the front Office - the escutcheon ring on the sprinkler head is missing leaving a hole in the fire resistant rated ceiling. b. Room 60 - the sprinkler head has dropped in the Bedroom leaving a hole in the fire resistant rated ceiling. c. Room 60 - there is a large opening around the sprinkler head in the closet and the head does not have an escutcheon ring. d. Spa (Right) - the escutcheon ring on the	{C 189}	C - G: Will be completed by 4/15/2024. H. Lead repaired and ceiling repainted. A. Escutheon ring replaced. B and C: Repairs to take place by 4/15/2024. D. Escutcheon ring replaced.	

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{C 189}	Continued From page 6 sprinkler head near the tub is missing leaving a hole in the fire resistant rated ceiling. e. Soiled Linen in Laundry - the exhaust fan grille is not secure to the ceiling leaving a gap in the fire resistant rated ceiling. g. Storage Room/Electrical - there is an unsealed cable bundle along the back wall. i. Dining - there is an unsealed cable penetration above the emergency light. j. Program Coordinator's Office - the junction box on the left wall is missing a cover plate. k. Med Room - the door hardware was changed leaving a 3" diameter hole through the corridor door. l. Dining Service Area - the escutcheon ring on the sprinkler head is missing leaving a hole in the fire resistant rated ceiling. m. Left Spa - there are 1/4" diameter holes through the door above and below the door handle. 3. Based on observation the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on December 20, 2023: AL Building: c. Wellness Office - the battery for the emergency light battery pack was on the floor of the Mechanical Room off of the Office and the battery pack box was open. Interview with staff revealed that the emergency lighting connected to this battery pack will need to be replaced. 6. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock	{C 189}	E. Addressed. G. Repairs to be made by 4/15/2024 I. Repair has been complete. J. Replaced cover plate of junction box. K. Med Room Door hole covered with plate. I. Escutcheon ring replaced. M. Repair to be completed by 4/15/2024 C. New battery back to be ordered and installed by 4/15/2024.	

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{C 189}	Continued From page 7 protection. AL Building: b. Small Dining Women's Toilet - the GFCI outlet is not secure to the wall. c. Small Dining Men's Toilet - the GFCI outlet does not have power. e. Laundry - the electrical box behind the commercial dryer is not secure. 9. Observations revealed that the plumbing was not maintained in a safe and operating condition. Loose toilet seats can cause injury from a slip or fall. Findings on December 20, 2023: AL Building: a. Women's Toilet off of Small Dining - the toilet seat is loose. 10. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke, resident room doors must not have gaps between the door and the door frame stops. Memory Care Building: b. Left Spa - the door hinge is loose and there is a 1/2" gap between the door and door frame at the top right corner of the door and along the hinge side of the door. 12. 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.	{C 189}	B. GFCI rescured to the wall. C. Power restored to GFCI E. Electrical box is now secure. A. Seat has been tightened. B. Door to be repaired by 4/15/2024.	

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{C 189}	Continued From page 8 Findings on December 20, 2023: AL Building: a. Dining - the automatic closers on the dining doors are not synchronized so that the door with the astragal closes first. Memory Care Building: b. Janitor by Left Spa - the closer on the door has been disabled so that the door which swings into the corridor no longer automatically closes and latches. This was corrected at the time of survey.	{C 189}	A. Doors now synchronize and close appropriately.	
{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.	{C 199}		

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{C 199}	Continued From page 9 Findings on December 20, 2023: a. AL - A Hall - the exhaust fans to the right of the smoke barrier wall are not working. Interview with staff revealed that a motor has been purchased but not installed. b. AL - C Hall - the exhaust fans on the long hall including the Staff Bathroom are not working. Interview with staff revealed that a motor has been purchased but not installed. c. SCU - the exhaust fans on the left side of the left hall are not working.	{C 199}	Exhaust fans repaired by vendor H. Lead repaired and ceiling repainted. A. Escutheon ring replaced. B and C: Repairs to take place by 4/15/2024. D. Escutcheon ring replaced.	

INSTALLATION JOB FORM

Issue Date: 10/19/2022
Customer #: 383764
Customer: Brookdale Concord Parkway #18310

2452 Rock Hill Church Road
CONCORD NC, 28027

Customer Contact:
Phone:
Email:

Task #: 75024
Issued By: MARY MOTOLA
Request #: 234512

Project #:
Sales Person: Ron Kosek
Terms: Net 45
Installing Company: INTEGRITY INSTALLATIONS EXPERTS ASP
Installer Contact:

Task Type: INSTALL - INSTALLATION PROJECT
Start Date: 11/14/2022
Description: Install Equipment Per Quote#24358
Test System for Functionality and Train Staff. Take Pictures of Installed Equipment.

On-Site ST:_____ On-Site OT:_____ On-Site DT:_____
Total Time:_____ Travel Time:_____ Add'l Airfare:_____

Installer Notes

All devices have been tested, installed, and powered on for all 4 doors and all pull-cords. The head end has been installed in the storage room next to the old system's head end. Both repeaters have been installed in the hallways. All devices have been integrated into the new server.

Tech Location: _____ Current SW Ver: _____ Model: _____
Updated SW Ver: _____ Frequency: _____

Qty	Item Number	Description	Unit Price	Ext. Price

Serial # _____ Replaced by # _____

If more serial numbers are needed, add on back of sheet.

Customer Approval

I have inspected the work performed by RF Technologies, Inc. and/or their subcontractors, and acknowledge that the work has been completed to my satisfaction.

Installing Company Instructions

1. Be sure to include Task# 75024 on all relevant forms.
2. Obtain a customer signature when work is completed.
3. Return this form with request for payment.

Customer Signature _____ Date _____

Customer Name (Please Print) _____ Email _____

RF Technologies, Inc, 3125 North 126th Street, Brookfield, WI 53005

Phone 1-800-669-9946 / Fax 262-790-9919

venture companies

Estimate

Date	Estimate No.
10/7/2022	15741

venture DRD
disaster recovery division

venture | management + reconstruction

8230 Poplar Tent Rd, STE 101
Concord, NC 28027
855-795-6127

Brookdale Senior Living Inc.
111 Westwood Place
Suite 200
Brentwood, TN 37027

Community Name

Brookdale Concord Parkway
2452 Rock Hill Church Road
Concord, NC 28027
BU #18310
Cabarrus 7

Description	Qty	Rate	Total
Front Entrance door from vestibule to inside community - Remove and Replace front entrance door - New door to be like for like as close as possible - Install new door frame, sidelines, and main 42" door - Prime and Paint entire door and frame - Point up and repair drywall as needed around opening - Clean up and Haul away all construction related debris ** Reset of existing hardware** ** Automatic door company may be needed to adjust mag locks after new door install	1	9,320.00	9,320.00T
NC Sales Tax		7.25%	675.70

Thank you for the opportunity! We now accept credit card payments!! If interested, please contact Terry at 855-795-6127 or Terry@venture-gc.com.

Total $9,995.70