

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL055004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 03/14/2024
NAME OF PROVIDER OR SUPPLIER NORTH BROOK REST HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 1611 NORTH BROOK III SHCOOL ROAD VALE, NC 28168		
(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 Suzanna Fay conducted on March 14, 2024. Records indicate that this facility was first licensed on October 4, 1990. This facility is currently licensed for twelve beds. Therefore, we are requiring this facility to meet the 1987 Rules of Homes For The Aged and Disabled (Minimum Standards and Regulations) and Infirm "Minimum and Desired Standards and Regulations and the applicable portions of the 2005 Regulations for Adult Care Homes of Seven or more Beds The 1978 North Carolina State Building Code Volume I - General Construction. Section-409 Institutional Occupancy-(I). Deficiencies were cited that require a Plan of Correction.	C 000		
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. Review of records revealed that the facility does not have current fire and building safety inspection reports maintained in the home and available for review. Findings on March 14, 2024: a. The most current Fire Alarm System inspection report was dated October 25, 2022.	C 111		

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

TITLE

(X6) DATE

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C 164	Continued From page 1	C 164		
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 ceilings and floors or floor coverings were not kept clean and in good repair. Findings on March 14, 2024: a. Pool Room - there is a 4' x 4' section of torn carpet near the entrance. b. Pool Room - one of the ceiling tiles to the right of the pool table is bowed so that it has pulled out of the grid. c. Room 5 - a section of the ceiling grid and connecting tiles is sagging near the closet. d. Room 5 Bath - a section of the grid in the shower is missing causing the ceiling to sag. 2. Observations revealed that the furnishings were not kept clean and in good repair. Findings on March 14, 2024: a. Room 1 - the veneer along the bottom edge of the door is peeling and splintering leaving a rough edge. b. A screw is missing at the bottom of the bracket making the short handrail across from the office	C 164		

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C 164	Continued From page 2 loose.	C 164		
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. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on March 14, 2024: a. The emergency light outside of the office did not illuminate on test. 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 could allow fire and smoke to spread beyond the area of origin. Findings on March 14, 2024: a. Auditorium - there is a hole in the ceiling approximately 18" long by 4" wide near the FACP. b. Bath by Laundry - the fan grille is not secure in the ceiling. This was corrected at the time of	C 189		

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C 189	Continued From page 3 survey.	C 189		