

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL014014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____		(X3) DATE SURVEY COMPLETED R 05/13/2025
NAME OF PROVIDER OR SUPPLIER BROCKFORD INN			STREET ADDRESS, CITY, STATE, ZIP CODE 56 N HIGHLAND AVENUE GRANITE FALLS, NC 28630		
(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 13, 2025. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{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, change in service or bed count, addition, renovation or alteration. Electromagnetic locks shall have an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors in the facility. Release switches shall be located and properly identified at each	{C 101}			

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

KZGZ22

Brockford Inn
Administrator
05/28/25
If continuation sheet 1 of 4

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{C 101}	Continued From page 1 nurses station serving the locked unit. An additional emergency release switch shall be provided for each locked door and located within 3 feet of the door. Findings on May 13, 2025: e. AL Side - there is not an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors in the locked unit. An emergency switch was installed near the front office. When released, the maglocks on the gates in the AL Courtyard and at the exit by 301 did not release.	{C 101}	C 101 Section .0300 - Physical Plant 10A NCAC 13F.0301 Application of Physical Plant Requirements - AL side emergency release switch has been repaired by replacing the corresponding relay. AL courtyard and exit by 301 now release when emergency release switch is activated.	05-23-25
{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 Construction Documents meeting all current regulations, codes and standards are submitted	{C 116}		

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{C 116}	Continued From page 2 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. Based on observation and interview, the facility has not submitted plans to DHSR/Construction for review when construction or remodeling is planned. Findings on May 13, 2025: a. Interview with staff revealed that a generator has been purchased but installation is not complete. Plans have not been submitted to DHSR/Construction for review and approval as the installation of the generator is on delay.	{C 116}	C 116- Section .0300 - Physical plant 10A NCAC 13F .0304 Plans and Specifications - Generator Installation has not occurred. The Generator was purchased and placed at facility for function testing. Once a contractor is secured by facility, Plans will be submitted to DHSR for approval. After approval is obtained, updates will be given at 50%, 75% and 90% of progress made to final completion.	05-13-25
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	{C 189}		

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{C 189}	Continued From page 3 (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 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 May 13, 2025: d. Room 201 - the sprinkler head is missing its escutcheon leaving a gap in the fire resistant rated ceiling.	{C 189}	C189 - Section .0300 - Physical Plant 10A NCAC 13F .0517 other requirements - Room 201 sprinkler head escutcheon ring has been replaced sealing a gap in the fire resistant rated ceiling.	05-28-25