STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL001028	A. BUILDING: **01** B. WING _____	**10/27/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE BURLINGTON	**3619 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 Biennial Survey by Billy S. Bryant conducted on 10/27/2016. Records indicate this facility was first licensed on 12/10/2000. The facility is currently licensed as a 52 Beds Special Care Unit. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1999) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	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. Based on observation the facility failed to	C 101		

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C 101	Continued From page 1 maintain emergency exits in accordance with the N.C. Building Code and the N.C. Fire Code. The building code allows override switches for magnetically locked doors to be operated by keys provided all staff responsible for assisting in emergency evacuation have keys to operate the switches. In the event of an emergency evacuation this could effect occupants of the facility if manual overrides for the special locking system could not be operated to open emergency exit doors. Finding on 10/27/2016: a. All staff responsible for emergency evacuation did not have keys to operate the magnetic lock's keyed manual overrides for the locked emergency exits. 2. Based on observation the facility failed to meet the intent of the N.C. Building Code by having a magnetically locked gate in the path of the exit discharge without a reliable means to ensure it could be unlocked in an emergency. Finding on 10/27/2016: a. The magnetically locked fence gate was equipped with an electronic keypad as the means to disengage the magnetic lock. An electronic keypad is succeptable to failure and does not meet the Building Code intent to have a reliable method, such as an on/off release switch, to unlock the gate in an emergency. 3. Based on observation and interviews with the facility director and phone conversation with the monitoring service company the facility failed to maintain a monitored fire alarm system in accordance with 409.1.7 of the 1996 N.C. Building Code.	C 101		

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C 101	Continued From page 2 Finding on 10/27/2016: a. The facility's fire alarm system was not monitored as the monitoring company stated the account was currently inactive.	C 101		
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. Based on observation the facility has failed to keep ceilings clean. Findings on 10/27/2016: a. "C" Hall Laundry - The return air grille and radiation damper are clogged with dust.	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.	C 189		

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C 189	Continued From page 3 This Rule is not met as evidenced by: 1. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Corridor doors are required to close completely and latch in the event of a fire. The occupants in the facility could be effected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on 10/27/2016: a. Salon - The door did not completely close and latch. b. Dining Room - The doors did not completely close and latch.	C 189		
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:	C 199		

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C 199	Continued From page 4 1. Based on observation the facility failed to meet the required exhaust ventilation requirement and keep the exhaust system in good repair. This could effect occupants if odors were present in the surrounding area of the rooms or closets. Findings on 10/27/2017: a. Soiled Linen Room - Near Health and Wellness - The exhaust fan was not working. b. "A" and "B" Hall - The central exhaust system for the halls is not working.	C 199		