

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092032	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 12/01/2016
NAME OF PROVIDER OR SUPPLIER BROOKDALE WAKE FOREST		STREET ADDRESS, CITY, STATE, ZIP CODE 611 SOUTH BROOKS STREET WAKE FOREST, NC 27587		
(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 Biennial Follow Up Construction Survey by Billy S. Bryant conducted on 12/01/2016. Some deficiencies noted during the 09/29/2016 Biennial Construction Survey remain to be corrected.	{C 000}		
{C 166}	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility is not maintained free from hazards. The building code designated required clearance for electrical equipment must not be encroached upon. Obstructing access to electrical equipment could delay timely operation in an emergency situation. Finding on 12/01/2016: a. Health and Wellness Director Office - Access to the electrical panels is obstructed by items stored in front of the panels. Note: Items were removed while the surveyor was on site. 2. Based on observation the facility is not maintained free from hazards. Electrical circuit breaker panels shall have the circuit breakers labeled/identified. Not identifying circuit breakers as to which electrical devices they control could	{C 166}	Community will ensure all electrical panels are free and clear of clutter. by 2/2/17	

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

TITLE

Executive Director

(X6) DATE

2/2/17

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(C 166)	Continued From page 1 delay timely operation of the breakers in an emergency situation. Finding on 12/01/2016: a. Health and Wellness Director Office - Panel "AA" did not have a circuit breaker schedule identifying to which electrical devices the breakers were connected.	(C 166)	Community will label all breakers in panel AA by 2/21/17.		
(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 there is a failure to maintain the facility's fire safety systems in a safe manner. Gaps at penetrations or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Findings on 12/01/2016: a. Both Exterior Patio Areas - There are gaps between the fire resistant rated ceiling and the fire sprinkler head escutcheon. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Common areas and	(C 189)	Community will repair all gaps on ceilings of patios by 2/21/17.		

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{C 189}	Continued From page 2 room 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. New Finding on 12/01/2016: a. Dining Room Double Doors to Dining Room - One door leaf latch is contacting the frame strike plate preventing the door from completely closing and latching when closed. b. The door coordinator has been removed and no other method of coordination was apparent. Removal of the door coordinator will prevent the other door leaf from completely closing if the door leaf with the astragal is closed first. 5. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. Failure to maintain fire alarm system devices and equipment in a safe and operable condition could effect all occupants of the facility if the equipment did not function when and as required. Finding on 12/01/2016: a. Activity Room - The room's ceiling mounted smoke detector is detached from the ceiling.	{C 189}	Community will make necessary repairs to the dining room doors by 2/21/17. Community will ensure the activity room smoke detector is reattached to the ceiling by 2/21/17	