STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL063024	A. BUILDING: **01** B. WING _____	**05/03/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE PINEHURST	**17 REGIONAL DRIVE PINEHURST, NC 28374**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Billy S. Bryant and Suzanna Fay conducted on 05/03/2017. Records indicate this facility was first licensed on 02/16/1998. The facility is currently licensed for 76 Beds including a 19 Bed 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 (1998 Revision) 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 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Based on observation the facility is not in compliance with the requirement that bathrooms shall not be utilized for storage. Finding on 05/03/2017: a. 300 Hall - The community bath has been taken out of service by the provider and is being used as a storage room.	C 135		

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C 147	Continued From page 1	C 147		
C 147	Corridors-Doors Must Not Swing Into Corridor SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (1) Doors to spaces other than reach-in closets shall not swing into the corridor; This Rule is not met as evidenced by: 1. The facility does meet the requirement that doors to spaces other than reach in closets shall not not swing into the corridor. Finding on 05/03/2017: a. Room 202 - On the corridor side of the entry door to the resident's room there is a screen door installed that swings out into the corridor.	C 147		
C 153	Exit Door Locks-Single Hand Motion SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (h) The requirements for outside entrances and exits are: (3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and This Rule is not met as evidenced by: 1. Based on observation the facility does not meet the requirement for outside entrances and exits to be operable by a single hand motion. Finding on 05/03/2017: a. The exit door at the front entrance has a dead	C 153		

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C 153	Continued From page 2 bolt lock with an interior thumb turn and the door handle is a lockset type hardware has a twist lock.	C 153		
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 is not free from chronic unpleasant odors. Finding on 05/03/2017: a. Room 102 - There is a strong urine odor in the room and with the room door shut the odor could also be detected in the corridor area outside the room. 2. Based on observation the facility has not kept flooring in good repair. Finding on 05/03/2017: a. Kitchen Dry Storage Room - The flooring tile is broken and missing at the entrance to the room. b. Shower Room - The vinyl flooring has curled up at the threshold to the shower stall and presents a possible tripping hazard. 3. Based on observation the facility has not kept	C 164		

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C 164	Continued From page 3 walls in good repair. Findings on 05/03/2017: a. 300 Hall, Clean Linen Room - The manual bolt lock has been torn away from the door damaging the door by creating a hole on the inside of the door. b. 400 Hall, Unisex Restroom - There is an approximately 4" diameter hole in the wall. c. 400 Hall, Wall Adjacent to Unisex Restroom - The wall base is missing at the cross corridor doors.	C 164		
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 there is a failure to maintain the facility free from hazards. Emergency means of egress/pathways must be kept clear of obstructions and encroachments and not used for storage. In the event of an emergency requiring evacuation from the facility, obstructing or encroaching on the means of egress/pathways could effect occupants of the facility by delaying evacuation. Finding on 05/03/2017:	C 166		

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C 166	Continued From page 4 a. Exit Vestibule Adjacent to Room 403 - There are items stored in the vestibule that could impede or delay exiting to the exterior of the facility in the event of an emergency evacuation. 2. Based on observation the facility is not maintained free from hazards. The building code designated required clearance of 36" for electrical equipment must not be encroached upon. Obstructing access to electrical equipment could delay timely operation in an emergency situation. Finding on 05/03/2017: a. Mechanical Room Near Kitchen - Access to the electrical breaker panels is obstructed by items stored in front of the panels. b. 200 Hall Porch - There is a board approximately 36" above the porch floor that has detached from the porch screen framing exposing the sharp ends of nails.	C 166		
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 equipment in a	C 189		

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C 189	Continued From page 5 safe operating condition. Resident room doors must not have gaps between the door and the door frame in order to resist the passage of fire and smoke smoke. Occupants of the facility could be effected if fire and smoke were not contained in the area of origin. Finding on 05/03/2017: a. Room 106 - At the top of the door there is a gap larger than ¼" between the door and the door frame stop. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe condition. Occupants of the facility could be effected if the fire sprinkler safety equipment could not function properly when required. Findings on 05/03/2017: a. Kitchen - The fire extinguishing system for the stove is required to be inspected every six months, the last inspection noted on the inspection tag was on 10/16. b. Room 107 - Some pillows stored on the top shelf in the closet were directly underneath and closer than 18" (within approximately 6") of the sprinkler head. Items stored within 18" of the sprinkler head may obstruct the water flow from the sprinkler head if it activated. 3. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the facility could be effected if doors do not close as required so as to limit the spread of smoke and/or fire to the area of origin. Finding on 05/03/2017: a. 100 Hall Laundry - The door closer for the door	C 189		

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C 189	Continued From page 6 to access the corridor has been removed and the door is propped open with a door wedge. 4. Based on observation there is a failure to maintain the building's fire safety components in a safe operating condition. Occupants in the facility could be effected if the fire resistant rated corridor wall could not limit the spread of smoke and/or fire to the area of origin. Finding on 05/03/2017: a. 100 Hall Laundry - Inside the room the wood trim is missing from the top of the door fame creating a gap between the door frame and the fire resistant rated wall. 5. Based on observation there is a failure to maintain the building's fire safety components in a safe operating condition. Any unapproved device that is used to keep a door open is an impediment to quickly closing a door to aid in containing smoke and/or fire. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin. Findings on 05/03/2017: a. 100 Hall, Laundry - The door to access the corridor was propped open with a door wedge. b. 100 Hall, LPN Office - The door to access the corridor was propped open with a door wedge. 6. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps 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.	C 189		

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C 189	Continued From page 7 Findings on 05/03/2017: a. Library - There is a gap between the fire resistant rated ceiling and the fire sprinkler head escutcheon. b. Room 405 - There is a gap between the fire resistant rated ceiling and the fire sprinkler head escutcheon. c. Dining Room - A fire sprinkler head escutcheon is missing creating a hole in the fire resistant rated ceiling where it is penetrated by the sprinkler pipe. d. 200 Hall Porch - Both fire sprinkler head escutcheons are missing creating a holes in the fire resistant rated ceiling where it is penetrated by the sprinkler pipes. e. 300 Hall, Spa - A taped gypsum board joint has split creating a gap in the fire resistant rated ceiling. f. 300 Hall Parlor - The ceiling HVAC grille has dropped down creating a gap in the fire resistant rated ceiling. 7. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors that open to corridors are required to close completely and latch in the event of a fire. The occupants in the smoke compartment 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. Finding on 03/2017: a. 300 Hall, Small Dining room - The door from the room to the corridor hits the door frame	C 189		

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C 189	Continued From page 8 preventing it from completely closing and latching. In addition the door has not been mortised to receive the bolt from the passage set hardware so it cannot latch to remain shut when closed. 8. Based on observation the facility has not maintained plumbing equipment in a safe condition. This could effect staff members by exposing them to possible injury by falling equipment. Finding on 05/03/2017: a. The hand washing sink in the kitchen is detaching from the wall and is extremely loose.	C 189		