STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL065023	A. BUILDING: **01** B. WING _____	**02/08/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE KEMPTON AT BRIGHTMORE	**2298 S 41ST STREET WILMINGTON, NC 28403**

(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 Construction Section Biennial Survey by Dennis Harrell and Ed Miller on 2-8-2018. Records indicate this facility was first licensed as a Home for the Aged on 6-4-1997. The facility is currently licensed for 84. Therefore the facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the1996 North Carolina State Building Code, Section 409.1 Institutional Unrestrained Occupancy. Deficiencies were cited that will require a plan of corrections.	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: The NC Plumbing Code requires the hot water to	C 101		

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C 101	Continued From page 1 be on the left. Finding: Based on observation, the hot and cold water are reversed on the sink in the 2nd floor spa.	C 101		
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 and interview, kitchen staff were not aware of the location or use of the system pull for the range hood fire suppression system. Staff must be trained about the range hood fire suppression system and the system pull. 2. Based on observation, an electrical outlet expander was in use in room 317 and there were 2 in room 237. Electrical outlet expanders are not approved for use in Institutional Occupancies. 3. Based on observation, extension cords were being used in place of permanent wiring. Extension cords are intended for temporary use only and 2 wire lamp type extension cords must never be used. Findings include; a. A lamp cord type extension cord was being used in place of permanent wiring in room 129. b. Two lamp cord type extension cords were	C 166		

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C 166	Continued From page 2 being used in place of permanent wiring in room 305. c. An extension cord was being used to power a refrigerator in the maintenance office. 4. Based on observation, the facility was not maintained in a safe condition because of storage in a stairwell. Stairwells must never be used for storage. Finding includes; Items were stored in the right side bottom stairwell. Note; This deficiency was corrected during the survey. 5. Based on observation, the facility was not maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability of the fire sprinkler system to extinguish a fire. Findings include; Items had been stacked all the way to the ceiling in the closet off room 129. 6. Based on observation, the ice machine drain line was only 1 inch above the floor drain. Additionally, there was a growth of fungus from the ice machine drain line to the floor drain. Ice machine drain lines that are not maintained clean and at least 2 inches above the floor or floor drain, as required by Code, could cause the ice to become contaminated.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan	C 185		

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C 185	Continued From page 3 quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on a review of documents, the records available onsite included little to no description of what the rehearsal involved.	C 185		
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, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility.	C 189		

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C 189	Continued From page 4 Findings include; a. The 3/4 hour fire door to the 1st floor soiled utility will not automatically latch when closed. b. The 3/4 hour fire door to the 2nd floor soiled utility will not automatically latch when closed. c. The 3/4 hour fire door to the 2nd floor soiled linen will not automatically latch when closed. d. Left side pair of doors to the Dining room would not close and latch. Note; This deficiency was corrected during the survey. e. A pair of doors to the Library do not latch when closed. f. A pair of doors to the Reception room do not latch when closed. g. One of the doors to the 2nd floor Country Kitchen/Sunroom will not latch when closed. h. The door to the 3rd floor CNA room was wedged open. i. Wedges were found at the door to the 2nd floor spa. j. A wedge was found at the door to the employee break room. 2. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. Unsealed sprinkler penetration in the 1st floor mechanical room across from the Dining room, b. Hole in the ceiling of the nurse station, c. Unsealed sleeve in the 1st floor janitor closet, d. Unsealed penetration in the closet off the Administrator's office, e. Holes in the walls in the telephone room, f. Hole in the smoke barrier wall near room 304,	C 189		

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C 189	Continued From page 5 g. Unsealed sleeve, at both ends, through the floor in storage across from room 329, h. Unsealed sleeves (2) in the maintenance office, i. Hole in the wall of the 2nd floor resident laundry, j. Hole in the wall of the soiled linen room at a cleanout, k. Holes around conduits through the ceiling of the exterior ceiling on the right side. 3. Based on observation, battery powered emergency lights would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. Mal-functioning lights include the following areas: a. 1st floor med room, b. Landing between 1st and 2nd floor in the right side stairwell, c. Corridor at room 109, d. Back of Dining room, e. Corridor at room 317. 4. Based on observation, a sprinkler head in the kitchen was covered with lint and other residue. Sprinkler heads must remain clean to ensure they can operate properly in an actual fire. 5. Based on observation, the light for the 3rd floor stairwell on the left side was damaged and not illuminated. Stairwells must remain illuminated at all times. 6. Based on observation, the magnetic hold open at one of the doors to the 2nd floor Country Kitchen/Sunroom is hanging off the wall by the wires.	C 189		

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C 199	Continued From page 6	C 199		
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: Based on observation the facility failed to maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly bacteria. Findings include; a. The exhaust provided was not working properly in the 1st floor biohazard room. Although the exhaust fan was running and removing a small amount of air, there was a strong unpleasant odor in the room. b. The 3rd floor housekeeping storage had many chemicals in it and a strong chemical odor. There was no exhaust provided in this room.	C 199		