

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL041033	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/01/2019
NAME OF PROVIDER OR SUPPLIER BROOKDALE HIGH POINT NORTH		STREET ADDRESS, CITY, STATE, ZIP CODE 1564 SKEET CLUB ROAD HIGH POINT, NC 27265		
(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 Construction Survey by Suzanna Fay conducted on May 1, 2019. Records indicate this facility was first licensed on March 17, 1998. The facility is currently licensed as a 65 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 Edition of the North Carolina Building Code, 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. Observations revealed that the facility was not	C 101		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 in compliance with the code requirements in effect at the time of construction, addition, renovation or alteration. Facilities have electromagnetic locks required to have a wiring diagram and system components location map under glass adjacent to the fire alarm panel. They are required to have an on/off emergency release switch(es) capable of interrupting power to all magnetically or electronically locked doors in the facility. Release switch(es) shall be located and properly identified at each nursing station and any other control station which are manned 24 hours. Findings on May 1, 2019: a. Barrel type keyed override switches were located in the Maintenance Office, the Program Coordinator's Office and in the Beauty Salon. Two of the switches had labels stating "red light on Doors are locked." Neither of the labeled switches released the doors. The unlabeled switch in the Beauty Salon could not be activated. b. There was not a wiring diagram at the fire alarm panel and the components map was incomplete as it did not indicate the location of the master override switch.	C 101		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by:	C 160		

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C 160	Continued From page 2 1. Observations revealed that the outside premises were not kept in a clean and safe condition. Findings on May 1, 2019: a. Courtyard outside of Activity Room - several of the pickets on the plastic railing had slipped out of their sockets. b. Kitchen area - a corner section of the exterior soffit outside of the kitchen door was pushed back inside the soffit leaving a large hole for pests to enter the facility.	C 160		
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. Observations revealed that the walls and ceilings were not kept in good repair. Findings on May 1, 2019: a. The ceiling finish tape is peeling off at the wall/ceiling juncture outside of Room 8. b. Riser Room - the wall below the freezer compressor line is heavily damaged and there are black mildew spots where the finish is peeling off of the walls.	C 164		

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C 166	Continued From page 3	C 166		
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. Observations revealed that the facility was not maintained free of hazards. Findings on May 1, 2019: a. Courtyard from Activity Room - the threshold was loose and duct tape was applied to the threshold in an attempt to repair it creating a greater trip hazard. b. Activity Room - there is a 1/4" hole at the hardware of the exterior door. The metal edges are bent and rough. c. Room 13 - a TV cable was run across the floor in front of the closet door creating a trip hazard. This was corrected at the time of survey. d. Room 34 - a towel bar was broken off of the wall leaving the sharp metal edges of the brackets exposed.	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	C 189		

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C 189	Continued From page 4 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 1, 2019: a. TV Room - there is a small gap in the ceiling at the sprinkler head. b. Beauty Shop - there is a small hole in the ceiling at the sprinkler head. c. Health and Wellness Director's Office - the escutcheon plate on the front sprinkler head has dropped leaving a gap in the ceiling finish. d. Bistro - one sprinkler head along the back wall has dropped about 2" below the ceiling. 2. Based on observation there is a failure to install and maintain required plumbing safety devices or equipment. Failure to maintain or install plumbing safety devices or equipment could effect all occupants of the facility if the absence of the plumbing safety devices or equipment caused the domestic water supply to become contaminated. Findings on May 1, 2019: a. Beauty Salon - there hair washing sink did not have a vacuum breaker. 3. Based on observation there is a failure to	C 189		

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C 189	Continued From page 5 maintain the facility's fire safety equipment in a safe condition. In order to resist the passage of smoke resident room doors must not have gaps between the door and the door frame stops or holes in the door. Findings on May 1, 2019: a. Room 13 - there is a 1/4" diameter hole in the door at the door hardware. 4. Observations revealed that the plumbing equipment is not maintained in a safe and operating condition. Loose or unsecured toilet seats or fixtures could cause injury to the residents due to slipping or falling. Findings on May 1, 2019: a. Spa 3 - the toilet seat is loose. 5. Based on observation the facility's fire safety components are not being maintained in a safe operable manner. Doors were blocked open or held open by unapproved devices or methods. All the occupants in the facility could be effected if doors cannot be closed or closed rapidly so as to limit the spread of smoke and fire to the area of origin. Findings on May 1, 2019: a. Kitchen Pantry - the door was held in an open position using a small chain. The chain was removed at the time of survey.	C 189		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to	C 195		

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C 195	Continued From page 6 provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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. Observations and testing revealed that the facility did not maintain a hot water temperature between 100 and 116 degrees Fahrenheit at all fixtures used by residents. Findings on May 1, 2019: a. Spa 1 - at the time of survey, the water temperature at the sink was 120 degrees Fahrenheit. b. Spa 3 - at the time of survey, the water temperature at the sink was 122 degrees Fahrenheit.	C 195		
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;	C 199		

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C 199	Continued From page 7 (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: 1. Observations revealed that the facility did not maintain exhaust ventilation in required areas. Findings on May 1, 2019: a. Room 13 Bath - the exhaust fan is not working. b. The exhaust fans in Hall 2 were not working at the time of survey. c. Resident Laundry - the exhaust fan is not working. d. Hall 3 - the exhaust fans are not working.	C 199		