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	HAL063024	A. BUILDING: **01** B. WING _____	**06/04/2019**

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BROOKDALE PINEHURST	**17 REGIONAL DRIVE PINEHURST, NC 28374**

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on June 4, 2019. 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. Deficiencies were cited that require a Plan of Correction.	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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: a. Front Door - the delayed egress locked door, does not have the required sign mounted above and within 12 inches of the releasing device reading: "PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS". b. Main Dining Courtyard Doors - the delayed egress locked doors, does not have the required signs mounted above and within 12 inches of the releasing device reading: "PUSH UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS".	C 101		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Based on record review, and interview with Executive Director the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on June 4, 2019: a. The current Annual Sprinkler System Inspection and Testing Report in accordance with NFPA 25, is not available for review by the Surveyor.	C 111		
C 150	Corridors-Free of equipment and Obstructions	C 150		

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C 150	Continued From page 2 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on June 4, 2019: a. Corridor near Copy Machine - the copier and boxes of supplies are obstructing the required six feet width corridor to 66 inches and 54 inches respectfully. b. MCU Exit Porch - the porch is blocked with vegetation and a discarded tent for half of its discharge width. c. MCU Vestibule near Bedroom 412 - there is much combustibles being stored in exit path.	C 150		
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: 1. Based on observation, the outside grounds are not maintained in a clean and safe condition. Findings on June 4, 2019: a. Sidewalks in Courtyard - a garden hose and	C 160		

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C 160	Continued From page 3 extension cord are crossing the sidewalk several time, creating a tripping hazard.	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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on June 4, 2019: a. Employee Rest room - the ventilation system with its radiation damper has an excessive accumulation of dust/lint. b. Resident Laundry Closet - the ventilation system with its radiation damper has an excessive accumulation of dust/lint. c. MCU Public Restroom - the ventilation system with its radiation damper has an excessive accumulation of dust/lint.	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	C 166		

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C 166	Continued From page 4 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 ice machine drain line is on the floor receptor. The NC Plumbing Code requires that ice machine drains must not directly contact the floor or floor receptor and a minimum of 2 inches of vertical clearance must be maintained between the ice machine drain and the floor or floor drain to prevent contamination. This could affect all residents, staff and visitors who dine here if waste water backs-up and contaminates the ice.	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 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: 1. Based on Record review and interview with Executive Director the Facility failed to document	C 185		

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C 185	Continued From page 5 the a short description of what the rehearsal involved. Findings on June 4, 2019: a. There is no description of what how staff and residents did during the rehearsal.	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, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on June 4, 2019: a. Smoke Barrier near Bedroom 301 - the smoke barrier's front leaf of the automatically closing, cross-corridor, double egress door, has a med cart and power cord blocking the door open when the fire alarm activates. 2. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections,	C 189		

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C 189	Continued From page 6 maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on June 4, 2019: a. Kitchen - per the attached semi-annual maintenance tag, the commercial kitchen hood's fire suppression system had its last semi-annual maintenance performed in October 2018. In addition, there has been no documentation of the monthly in-house/owner inspections since that time. 3. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on June 4, 2019: a. Main Dining Room - the ceiling-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. b. Corridor near Bedroom 209 - the ceiling-mounted self-contained emergency light did not illuminate on backup power when the test button is pushed. c. MCU Vestibule near Bedroom 412 - the ceiling-mounted self-contained combination emergency light and sign did not illuminate on backup power when the test button is pushed. d. MCU Vestibule near Bedroom 412 - the ceiling-mounted self-contained emergency light did not illuminate on normal power and on backup power when the test button is pushed. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch	C 189		

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C 189	Continued From page 7 to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on June 4, 2019: a. MCU Smoke Barrier near Bedroom 401 - the front leaf, of the double-egress cross-corridor doors, did not latch when the fire alarm system released the doors. 5. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke. Corridor door must positively/automatically latch into their frame under normal closing force. This could affect all residents, staff, and visitors if the doors did not latch to contain smoke/fire in the room of origin. Findings on June 4, 2019: a. Private Dining - the pair of corridor doors is equipped with a manual flush bolt on the inactive leaf circumventing the requirement for these doors to be have positive latching. Currently these doors do not latch. b. Main Dining - this pair of corridor doors, part of the smoke resisted enclosure for the kitchen, is equipped with a manual flush bolt on the inactive leaf circumventing the requirement for these doors to be have positive latching. In addition, there is a gap between their meeting stiles. Currently these doors do not latch. 6. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on June 4, 2019: a. Main Electrical Room - there is a gap between the installed fire collar and the ceiling not firestopped as it penetrates the fire-resistance-rated ceiling assembly.	C 189		

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C 189	Continued From page 8 b. Housekeeping - there is a hole in the wall not firestopped as it penetrates the fire-resistance-rated wall assembly. 7. Based on observation, the facility was not maintained in a safe manner by having fire rated doors not close completely to contain smoke and fire. This could affect all residents and staff by not containing smoke and fire in the fire room of origin. Findings on June 4, 2019: a. Bulk Laundry - the required self-closing door is held open with a large trash can and hamper. The fire rated door must stay closed or be held open with a hold open device that releases on fire alarm activation. 8. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on June 4, 2019: a. MCU Activity - the fire alarm system's smoke detector is dangling from the ceiling by its power/operational wires. 9. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to smoke if not contained in room of origin. Findings on June 4, 2019: a. Corridor near Copy Machine - there is a hole in the corridor wall, making the wall not smoke tight. 10. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on June 4, 2019:	C 189		

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C 189	Continued From page 9 a. Courtyard - an extension cord is being used to power exterior lighting. Extension cords cannot substitute for permanent wiring. b. Kitchen Office - many items are stored in front of the electrical panels, limiting the required 36-inches by 30-inches minimum clear working space. 11. Based on observation, the Building was not maintained in a safe and operating condition, because the electrical lighting system was not being operated or maintained safely, providing reliable illumination. This could affect all if walking areas are not illuminated, alerting all of tripping hazards and/or obstructions Findings on June 4, 2019: a. Exit Porch near Bedroom 108 - the exterior light fixture is missing its globe. 12. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on June 4, 2019: a. Clock-in Room - the corridor door is missing its latch bolt; therefore, the door cannot latch to its frame. b. 200 Hall Parlor- the corridor door hits its frame and does not latch into its frame. c. MCU TV Room - the corridor door hits its frame, requiring extra force and/or effort to close and open. 13. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on June 4, 2019: a. Beauty Shop - the corridor door has a mechanical kick down and a walker holding the door open. This prevents the rapid release of the	C 189		

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C 189	Continued From page 10 door with a light push or pull of the door, to close and latch. b. Main Dining - the corridor door has a chair holding the door open and a table in the swing path of the door. This prevents the rapid release of the door with a light push or pull of the door, to close and latch. 14. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the room or compartment of origin. Findings on June 4, 2019: a. Corridor near Beauty Shop - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. b. Kitchen - many of the escutcheon plates on the fire sprinklers have dropped down from the fire-resistance-rated ceiling exposing openings that allows the spread of smoke and heat. c. Corridor near Bedroom 310 - many of the escutcheon plates on the fire sprinklers have dropped down from the fire-resistance-rated ceiling exposing openings that allows the spread of smoke and heat. d. Housekeeping near Bedroom 211 - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. e. Corridor near Bedroom 402 - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. f. 200 Hall Soiled Utility near Bedroom 211 - the escutcheon plate on the fire sprinkler has	C 189		

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C 189	Continued From page 11 dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. g. MCU Vestibule near Bedroom 412 - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. h. MCU Activity Room - the fire sprinkler head is missing its escutcheon plate, exposing an opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat. i. MCU Activity Room Closet - the escutcheon plate on the fire sprinkler has dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. 15. Based on observations and record review, the Building was not maintained in a safe and operating condition. The fire sprinkler heads have become obstructed with debris. This could affect all residents, staff and visitors if the fire sprinkler heads' have their thermal elements insulated with debris causing a delay in the response to a fire. Findings on June 4, 2019: a. Resident Laundry Closet - the fire sprinkler head is debris-loaded with lint.	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	C 199		

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C 199	Continued From page 12 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: 1. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in proper working order. This could affect all residents, staff, and visitors by preventing the exhausting of odors. Findings on June 4, 2019: a. Bulk Laundry - the required exhaust ventilation system did not work.	C 199		