STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL041033	A. BUILDING: **01** B. WING _____	R **07/03/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE HIGH POINT NORTH	**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 Follow Up Construction Survey report by Frank Strickland on 07/03/2019: There are previous cited deficiencies from the Biennial Construction Survey that require corrective action and a new Plan of Correction is required.	{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 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	{C 101}		

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{C 101}	Continued From page 1 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 07/03/2019: 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: 1. Observations revealed that the outside premises were not kept in a clean and safe condition. Findings on 07/03/2019: a. Courtyard outside of Activity Room - several of the pickets on the plastic railing had slipped out of	{C 160}		

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{C 160}	Continued From page 2 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 07/03/2019: 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}		
{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	{C 199}		

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{C 199}	Continued From page 3 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: 1. Observations revealed that the facility did not maintain exhaust ventilation in required areas. Findings on 07/03/2019: 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}		