Division of Health Service Regulation

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL036013 | A. BUILDING: _____ B. WING _____ | R 03/19/2019 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| BROOKDALE NEW HOPE | 1680 SOUTH NEW HOPE ROAD GASTONIA, NC 28054 |

| (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 |
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| {D 000} | Initial Comments<br><br>The Adult Care Licensure Section conducted an Follow-up survey on March 19, 2019 | {D 000} | | |
| {D 074} | 10A NCAC 13F .0306(a)(1) Housekeeping And Furnishings<br><br>10A NCAC 13F .0306 Housekeeping And Furnishings<br>(a) Adult care homes shall:<br>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;<br><br>This Rule is not met as evidenced by:<br>Based on observations and interviews, the facility failed to assure walls and doors in 2 resident rooms (#37 and #40) were in good repair.<br><br>The findings are:<br><br>Observations of the walls and doors in resident room #37 on 03/19/19 between 9:00am and 9:45am revealed:<br>-In resident room #37, the entry door both the left and right lower door frame had scratches that revealed bare wood, and the bottom of the doors had black scuff marks.<br>-In resident room #37, the entry door, 1/3 of the way up had scratches that revealed bare wood, and the bottom of the doors had black scuff marks.<br>-In resident room #37, the bathroom door, both inside and outside 1/3 of the way up had scratches that revealed bare wood, and the bottom of the doors had black scuff marks. | {D 074} | 10A NCAC 13F.0306 Room 37:<br>1. Bathroom door will be replaced<br>2. Bathroom door frame will be sanded and painted<br>3. Closet door and frame will be sanded and painted<br>4. Entry wall trim will be replaced<br>5. Left entry hall sheetrock will be replaced and painted<br>6. All scuff marks removed<br><br>This will be completed by Maintenance Tech and confirmed by Executive Director | Completed by 9/1/19 |

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Jakeisha Ellis — TITLE: Executive Director — (X6) DATE: 9/3/19



Reviewed and excepted by
Diana Spalding RN, BSN

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| {D 074} | Continued From page 1<br>-In resident room #37, both the lower third of the bathroom door frame and the closet door frame had scratches that revealed bare wood, and the bottom of the doors had black scuff marks.<br>-In resident room #37, the lower portion of the right side bathroom wall, had scratches and deep gouges in the sheetrock and black scuff marks on the wall.<br>-In resident room #37, the lower portion of the back bathroom wall, had scratches and black scuff marks on the wall.<br>-In resident room #37, the right side bathroom sink cabinet door was off of its hinges.<br>-In resident room #37, the baseboard to the left of the closet door had scratches that revealed bare wood.<br>-In resident room #37, the first closet on the right had scratches that revealed bare wood on the door frame, and the bottom of the doors had black scuff marks.<br>-In resident room #37, the second closet on the right had scratches that revealed bare wood on the door frame, the right side of the door frame was loose and splintered, and the bottom of the doors had black scuff marks.<br>-In resident room #37, the right side entry wall trim was broken.<br>-In resident room #37, the left side entry wall was gouged and sheetrock was missing and had black scuff marks.<br><br>Observations of the walls and doors in resident room #40 on 03/19/19 between 9:00am and 9:45am revealed:<br>-In resident room #40, there was a black scuff mark on the left wall approximately 36 in. by 2 in. in size and a black scuff mark on the right wall approximately 24 in. by 2 in. in size.<br>-In resident room #40, the lower third of the bathroom door frame had deep scratches that | {D 074} | 10A NCAC 13F.0306<br>1. Painting, door frame, and sheetrock same as noted above<br>2. All bare wood and scratches will be painted and corrected<br>3. Right side bathroom wall scratches and gouges will be corrected and replaced<br>4. Back bathroom wall scratches and scuff marks removed<br>5. Right side bathroom sink cabinet off of the hinges will be repaired<br>6. Baseboard left side of closet door, scratches and bare wood will be repaired and painted<br>7. First closet on right bare wood will be painted and repaired<br>8. Door frame scratches and scuff marks will be repaired and painted.<br>9. Right side of door frame loose and splintered will be repaired and painted<br>10. Bottom of door with black scuff marks will be removed<br>11. Right side entry wall trim will be repaired<br>12. Left side entry wall gouge and sheetrock will be repaired and scuff marks removed<br><br>10A NCAC 13F.0306 Room 40<br>1. Remove black scuff mark on right wall<br>2. Lower left bathroom door frame bare wood and scratches repaired and remove black scuff marks<br>3. Baseboards on the left of bathroom door and across from bathroom door barewood and scratches will be repaired<br><br>This will be completed by the Maintenance Tech and confrimed by Executive Director | Completed by 9/1/19 |

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| {D 074} | Continued From page 2<br>revealed bare wood, and the bottom of the door had black scuff marks.<br>-In resident room #40, the baseboards to the left of the bathroom door and across from the bathroom door were scratched with bare wood showing.<br><br>Review of the Weekly Maintenance Rounds log book on 03/19/19 at 1:00pm revealed:<br>-Weekly entries were made starting 11/27/18 - 03/14/19.<br>-There was documentation of various environmental concerns such as issues with the carpet and walls in the common areas and resident rooms.<br>-Rooms #37 and #40 were not documented as needing repairs.<br><br>Review of the Staff Maintenance Log Book on 03/19/19 at 1:00pm revealed there were no entries for rooms #37 and #40 documented in the log book for repairs by the staff.<br><br>Interview with a resident from room #37 on 03/19/19 at 9:36am revealed:<br>-No repairs had been completed to the walls and doors in her room since she has lived in facility.<br>-Her wheelchair caused the damage to the walls and doors.<br>-She was afraid she would cut her leg on the splintered closet door trim.<br>-She had caught her clothes on the splintered closet door trim before but had not cut herself.<br>-She reported the splintered closet door trim to the maintenance man several months ago after she caught her wheelchair on the trim and pulled it loose.<br>-She was ashamed of the way the room looked and could not have guests visit because it looked so bad. | {D 074} | 10A NCAC 13F.0306<br>Community now utilizes TELS system and all managers have the TELS application on their phone. The work orders will be entered immediately in the TELS system. TELS system will be monitored daily by the Maintenance Director and confirmed by the Executive Director.<br><br>Executive Director will follow up with the resident that all repairs have been completed on 9/3/19. | In effect as of 5/15/19<br><br>Completed by 9/3/19 |

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| {D 074} | Continued From page 3<br>-The maintenance man told her he would fix the wall back in November and now would not because she "will just damage it again".<br><br>Interview with a resident from room #40 on 03/19/19 at 10:00am revealed:<br>-The repairs had not been done in her room since she had lived at the facility.<br>-Her wheelchair caused the damage to the walls and doors.<br>-The maintenance man told her he would not repair the walls and doors because they would "just get damaged again".<br><br>Interview with a personal care aide (PCA) on 03/19/19 at 12:03pm revealed:<br>-She reported all damages or repairs needed to the Resident Care Coordinator (RCC) and medication aide (MA) then filled out the Staff Maintenance Log Book.<br>-Rooms #37 and #40 have been damaged since she started in November 2018.<br>-She told the Maintenance Director (MD) about a lot of issues with rooms #37 and #40 but he did not fix them. He told her "it would just happen again".<br><br>Interview with another PCA on 03/19/19 at 12:15pm revealed:<br>-She reported repairs needed to the RCC, the MA and also documented in the Staff Maintenance Log Book.<br>-Rooms #37 and #40 have been damaged since November 2018.<br>-She told the MD about a lot of issues in the facility concerning repairs and the MD was rude and would not fix the issues even if they were in the log book.<br><br>Interview with the RCC on 03/19/19 at 1:54pm | {D 074} | Room 40 has been vacated. Prior to any new admission, Maintenance Director will complete all repairs and Executive Director will confirm.<br><br>Clinical staff will report any damages to the Resident Care Coordinator. The Resident Care Coordinator will enter the repair in TELS. The Maintenance Director will complete the repair and the Executive Director will confirm. | Completed by 9/1/19<br><br>Completed by 9/1/19 |