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	HAL041033	A. BUILDING: **01** B. WING _____	**02/18/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE HIGH POINT NORTH	**1564 SKEET CLUB ROAD HIGH POINT, NC 27265**

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C 000	Initial Comments Report on a Construction Section Biennial Survey conducted by Ed Miller on February 18, 2025. 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. 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: 1. Based on observation and interview with the Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the components required and or procedures to comply and properly operate doors equipped with Special Locking. This could affect all occupants who need to evacuate through the door(s). Findings on February 18, 2025: a. Entire Building - upon fire alarm system activation, the electromagnetic locks released their hold on the doors. When the fire alarm system was placed in silence mode, the electromagnetic locks reenergized, holding the doors closed. b. Mechanical Room located in Employee Lounge - there was no "Special Locking System" wiring diagram, and system component's location map posted under glass at the fire alarm control panel.	C 101		
C 133	Bathrooms-Hand Grips SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents; This Rule is not met as evidenced by: 1. Based on observation, the facility did not provide all commodes, used by or accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not	C 133		

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C 133	Continued From page 2 providing increased safety, controlled against instability/balance, and maneuverability at the fixture. Findings on February 18, 2025: a. Bathroom 9, Toilet Room - there was no hand grip installed at the commode.	C 133		
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 were not maintained in clean and safe condition. Findings on February 18, 2025: a. Exterior, Exit near Bedroom 12 - there were two pieces of plywood and a screen on the ground. b. Exterior, Sidewalk from Exit near Bedroom 12 - there was a walk-off mat folded over 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;	C 164		

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C 164	Continued From page 3 (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the mechanical systems were not kept clean and in good repair. Findings on February 18, 2025: a. Spa 1 - the exhaust ventilation grille and its radiation damper had an excessive accumulation of dust/lint. b. Spa 2 - the exhaust ventilation grille and its radiation damper had an excessive accumulation of dust/lint. c. Mechanical Room 4 - the grille was too small for the opening through the fire-rated ceiling. d. Kitchen - the commercial kitchen hood filters were greasy and dirty.	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 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 Building was not maintained free of hazards, because general maintenance was not being done or has not been completed. This could affect all residents, staff, and visitors if items were broken or partially removed and left where they could harm all.	C 166		

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C 166	Continued From page 4 Findings on February 18, 2025: a. Bedroom 29 - a hasp latch was removed from its metal door and frame exposing screw holes with burs. These burs were rough and had sharp edges, which provides potential to cause harm. 2. Based on observation, the Building Plumbing fixtures are not free of all hazards. Findings on February 18, 2025: a. Women's Public Restroom near Dining - the commode was not secure to the floor. 3. Based on Observation, the facility failed to provide mechanical systems free of hazards. This could affect all residents, staff and visitors if equipment in disrepair injures someone. Findings on February 18, 2025: a. Dining - the HVAC supply return exhaust fan grille was not secured to the ceiling. b. Spa 3 - the shower had a built-in shower seat that was separating from its support wall.	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 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 observations, the building fire	C 189		

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C 189	Continued From page 5 safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in the room of origin. Findings on February 18, 2025: a. Mechanical Room in Kitchen - there was a hole not firestopped as it penetrated the fire-resistance-rated ceiling assembly. b. Mechanical Room in Kitchen - there was a hole not firestopped as it penetrated the fire-resistance-rated wall assembly. c. Kitchen Pantry - there was a hole with a blue pipe not firestopped as it penetrated the fire-resistance-rated ceiling assembly. 2. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on February 18, 2025: a. Beauty Shop - the corridor door did not latch into its frame when closed. b. Bedroom 12 - the corridor door's latch bolt stayed retracted 4 out of 5 times when the door was closed. c. Bedroom 30 - the corridor door did not latch into its frame when closed. 3. Based on observation, the facility was not maintained in a safe and operating condition by not having fire rated doors closed to contain fire and smoke. This could affect all residents and staff by not containing fire and smoke in the room of origin. Findings on February 18, 2025: a. Kitchen Pantry - a self-closing, fire rated door was tied open with a string. Fire rated doors must stay closed or be held open with a hold-open device that releases when the fire alarm activates. 4. Based on observation the fire safety	C 189		

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C 189	Continued From page 6 equipment was not being maintained to ensure safety. This could hamper the staff's ability to extinguish a small fire, permitting it to grow. Findings on February 18, 2025: a. Laundry 1 - in March 2024 the portable fire extinguisher had its annual maintenance performed. Since that time there has been no documentation of the monthly in-house/owner inspections. b. Laundry 1 - three folded walkers and a tilted laundry cart was blocking access to the portable fire extinguisher. c. Laundry 2 - in March 2024 the portable fire extinguisher had its annual maintenance performed. Since that time there has been no documentation of the monthly in-house/owner inspections. d. Laundry 2 - the gauge on the portable fire extinguisher indicated that recharging is required. e. Kitchen - the class ABC fire extinguisher had its annual maintenance performed in March 2024. Since that time there has been no documentation of the monthly in-house/owner inspections except for December 2024. f. Kitchen - the class ABC fire extinguisher was sitting on the floor. g. Kitchen - there was no class K fire extinguisher. 5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on February 18, 2025: a. Exterior, Near Bedroom 6 - the ground-fault circuit-interrupter (GFCI) electrical power receptacle did not trip when the test button was pushed and when tested with a GFCI circuit tester device. The GFCI circuit tester device indicated there was an open neutral. b. Exterior, Near Bedroom 30 - the ground-fault	C 189		

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C 189	Continued From page 7 circuit-interrupter (GFCI) electrical power receptacle did not trip when the test button was pushed and when tested with a GFCI circuit tester device. The GFCI circuit tester device indicated there was an open neutral. c. Exterior, near Bedroom 8 - an electrical junction box with energized components, had broken away from its conduit, exposing the wires. d. Health and Wellness Office - a multiplug adaptor, without integral overcurrent protection, was attached to an electrical power receptacle. e. Laundry 3 - the electrical power receptacle was missing its cover plate. 6. Based on observation and interview with the Maintenance Director, the Building did not have an adequate supply of spare fire sprinkler heads as required by NFPA 13. Findings on February 18, 2025: a. Sprinkler Riser Room - there were no spare general use fire sprinkler heads in the fire sprinkler head storage box.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.	C 191		

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C 191	Continued From page 8 This Rule is not met as evidenced by: 1. Based on Observation the facility contained portable electric heaters. Findings on February 18, 2025: a. Bedroom 9 - there was an electric heater not permanently mounted to the wall and was not wired directly into the building. The unit used keyhole slots and screws for mounting and cord and plug electrical connections. b. Med Room - there was one portable electric heater in use in the room and one under another desk. c. Program Director - there was one portable electric heater on the floor. d. Office across for Executive Director - there was one portable electric heater under a desk.	C 191		
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: 1. Based on observation and testing with a thin	C 199		

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C 199	Continued From page 9 plastic sheet, the facility did not provide working exhaust ventilation in spaces required to have exhaust ventilation. Findings on February 18, 2025: a. Bedroom 9 Toilet Room - the exhaust ventilation system was not functioning. b. Laundry 2 - the exhaust ventilation system was not functioning.	C 199		
C 201	Newly Licensed Facilities-Call System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (i) In newly licensed facilities without live-in staff, an electrically operated call system shall be provided connecting each resident bedroom and bathroom to a staff station. The resident call system activator shall be such that they can be activated with a single action and remain on until deactivated by staff at the point of origin. The call system activator shall be within reach of the resident lying on the bed. (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 interview with the Maintenance Director, the electrically operated call system does not provide all the required components/procedures required of a call system. Findings on February 18, 2025: a. All Spa's - the call system's pull stations at the commodes, showers and tubs were not working.	C 201		