

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032016	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/31/2016
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NAME OF PROVIDER OR SUPPLIER BROOKDALE CHAPEL HILL AL (NC)	STREET ADDRESS, CITY, STATE, ZIP CODE 2220 FARMINGTON DRIVE CHAPEL HILL, NC 27614
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(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 Follow-up Survey by Ed Miller on August 31, 2016. Some deficiencies were not corrected. Further action 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- Based on observation, and interview with Maintenance Director, the facility, which was equipped with Special Locking and delayed egress on the exit doors, failed to meet the requirements as defined by the NC State Building Code, which permits the installation of Special Locking on exit doors of buildings that are protected throughout, by an approved supervised automatic smoke detection system or an automatic sprinkler system. In buildings that are	(C 101)		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Soshan Sacks* TITLE: *Maint Director* (X6) DATE: *9/27/16*

STATE FORM 6009 HJ2023 If continuation sheet 1 of 3

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(C 101)	Continued From page 1 not protected throughout, there could be a dangerous delay in detecting the start of a fire. Findings on August 31, 2016: a- The closets in the resident room bathrooms throughout the building, ranging in size from 3' x 3' to 3' x 4', are not equipped with a sprinkler head on the inside of the closets. b- The linen closets in the Spa Bathrooms throughout the building, are not equipped with a sprinkler head on the inside of the closets.	(C 101)	a. Remove all Bathroom closet Doors b. Remove all spa closet Doors.	10/14/16
(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 facility has failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin. Findings on August 31, 2016: f- The double door coordinator for the	(C 189)	F. Replace door coordinator	10/14/16

ED Miller
 910 723-6592

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NAME OF PROVIDER OR SUPPLIER
BROOKDALE CHAPEL HILL AL (NC)

STREET ADDRESS, CITY, STATE, ZIP CODE
**2220 FARMINGTON DRIVE
CHAPEL HILL, NC 27514**

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(C 189)	Continued From page 2 Living Room corridor door on C Hall is sprung.	(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 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 (a) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1- Based on observations and testing, the facility has failed to maintain the mechanical exhaust systems in working condition. This may affect all persons in the building as it prevents the exhausting of odors and moisture. Findings on August 31, 2016: b- The exhaust fans located in C wing are not moving air.	(C 199)		
			b. Replace missing FAN Belts on Roof Units.	10/14/16