

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060060	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/04/2016
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NAME OF PROVIDER OR SUPPLIER BROOKDALE CHARLOTTE EAST	STREET ADDRESS, CITY, STATE, ZIP CODE 6053 WILORA LAKE ROAD CHARLOTTE, NC 28212
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C 000	<p>Initial Comments</p> <p>Report of Biennial Construction Survey by Dennis Harrell on 11-4-2016.</p> <p>Records indicate this facility was first licensed on 7-1-1998, for 50 beds Based on this information, we are requiring the facility to meet the 1996 "Homes for the Aged and Disabled - Minimum Standards and Regulations", applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 w/ '98 rev Edition of the North Carolina State Building Code; Section 409 Institutional Occupancy - Group I.</p>	C 000		
C 111	<p>Must Have Current San. & Fire Safety Reports</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on a review of documents, the most recent Fire Marshal building safety inspection report was dated in 3-31-2015. Buildings must be inspected and approved annually as required to ensure all systems can operate properly in an actual emergency.</p>	C 111		
C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>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</p>	C 150		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 150	Continued From page 1 other obstructions. This Rule is not met as evidenced by: Based on observation, the corridors were not maintained free of obstructions. Findings include: a. The exit corridor at the bottom of the stairs near room 1102 was partially blocked with combustible baskets and buckets. b. The exit corridor at the bottom of the stairs "2" was partially blocked with much storage	C 150		
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: Based on observation, the doors to bedrooms 1211, 1216, and 1218 were badly scratched and in need of repair and paint.	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;	C 166		

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C 166	<p>Continued From page 2</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the ice machine drain line was in direct contact with the floor drain. Ice machine drain lines that are not maintained at least 2 inches above the floor or floor drain, as required by Code, could cause the ice to become contaminated.</p> <p>2. Based on observation, the waste trap for the hopper had been allowed to become dry. Dry waste traps allow noxious, combustible odors and possibly harmful bacteria to enter the facility.</p>	C 166		
C 185	<p>Fire Safety-Rehearsals on Each Shift</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION</p> <p>(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.</p> <p>(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.</p> <p>(f) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by: Based on a review of documents, the records available onsite included little to no description of what the rehearsal involved.</p>	C 185		

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C 189	Continued From page 3	C 189		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(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.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 1. Based on observation, the fire alarm system was showing a "Trouble" condition. Fire alarms in "Trouble" may fail to operate properly when needed. 2. Based on observation, many corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. <p>Findings include;</p> <ol style="list-style-type: none"> a. One of the smoke barrier doors near room 1106 would not close completely when activated by the fire alarm system, b. One of the smoke barrier doors near room 1206 would not close completely when activated by the fire alarm system, c. The 1½ hour fire door to the stairway near room 1121 would not latch when closed. d. The door to bedroom 118 would not latch when closed. e. All 4 doors to the Living room on the second floor were held open with mechanical 	C 189		

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C 189	Continued From page 4 "kick-downs." f. One of the double doors to the Dining room was wedged open. 3. Based on observation, there was no key onsite to allow entry into the DON office and the Assistant DON office. Without a key, we could not enter to survey for hazards in the rooms.	C 189		