

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL092027</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>08/17/2017</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BROOKDALE MACARTHUR PARK</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>111 MACARTHUR DRIVE CARY, NC 27513</b>
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C 000	Initial Comments  Construction Section Biennial Survey report by Frank Strickland and Billy Bryant on 08/17/2017:  This facility was first licensed on 10/22/1996 for 80 beds. Based on this information, this facility is required to meet the 1996 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 North Carolina State Building Code Section 409.1- Group I.  Deficiencies have been cited and a Plan of Correction is requird.	C 000		
C 136	Bathrooms-Must Be Mechanically Ventilated  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (11) Toilets and baths shall be well lighted and mechanically ventilated at two cubic feet per minute. The mechanical ventilation requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation;  This Rule is not met as evidenced by: 1-Based on observation, this facility failed to provide an environment in accordance with this Rule by not providing ventilation where odors are generated. This could affect residents and staff by subjecting them to house-keeping odors.  Findings on 08/17/2017: The mechanical exhaust fans are not exhausting interior air in the following locations: (a) Housekeeping Closet/First Floor (b) Spa/Second Floor	C 136	<i>ED/Designee will secure vendor /or technician to repair exhaust fans in affected areas.</i>	<i>9/30/17</i>

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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*J. Mull*, Executive Director *9/13/17*

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C 136	Continued From page 1  (c) Rest Room adjacent to Activity Room/Second Floor (d) Unisex Bathroom/Second Floor	C 136		
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-Based on observation, this facility has failed to maintain and service the lay-in ceilings in all spaces.  Finds on 08/17/2017: The lay-in ceiling tile and grid is damaged located in the right-hand side in the First Floor Laundry.	C 164	<i>Ceiling tile &amp; grid will be replaced/repaired by maintenance support staff.</i>	<i>9/30/17</i>
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:	C 166		

*Swabs, ED 9/13/17*

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C 166	Continued From page 2  1-Based on observation, this facility has failed to maintain, clean and service it's Kitchen equipment.  Findings on 02/21/2017: The Kitchen range and exhaust hood have the following health/safety issues: (a) There is grease running down the sidewalls of the range and dripping on the floor. (b) The range exhaust hood has grease build-up on all the surfaces over the cooking surfaces. (c) The stove top grates have excessive grease build-up.	C 166	<i>Dining Service Coordinator will work w/ team to thoroughly clean identified areas and develop routine cleaning schedule.</i>	9/30/17
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 observation, this facility does not have emergency pulls that are easily accessible in the event of an emergency for fire alarm activation.  Findings on 08/17/2017: The emergency pull station is further than 5 feet from the front door and is located in the corner behind furniture which makes accessibility questionable.	C 189		<i>Regional MT / Designee will relocate pull station w/in the appropriate distant from door.</i>

*[Signature]*, ED 9/13/17


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C 189	Continued From page 3  2-Based on observation, this facility has not maintained in a safe and operating condition because the noted interior doors do not latch preventing the containment of fire and/or smoke from the room of origin. This could affect all residents and staff in the event of a fire.  Findings on 08/17/2017: The following doors are out of adjustment and do not latch: (a) Smoke doors on Magnolia Side (b) Kitchen door on Magnolia Side (c) Private Dining Room Entry Door (d) Library Door/First Floor (e) Room 205 (f) Cross Corridor Doors adjacent to Barber/Beauty Shop (g) Bathroom adjacent to Business Office Coordinator/First Floor (h) Med Room/First Floor  3-Based on observation, this facility has failed to ensure that all smoke-barrier will close and latch when the fire alarm system is activated.  Finds on 08/17/2017: There is a card playing table and chairs that are on the Second Floor Parlor. The furniture pieces are adjacent to the Activities Room and cross corridor doors. One of the chairs was in the path of the door swing preventing the door to close and latch.  4-Based on observation, this facility has failed to ensure that all interior doors latch and close tightly to door stops to the passage of smoke/fire.  Finds on 08/17/2017: The Unisex Bathrooms on the First and Second	C 189	<p>② Regional MT/Designer will make adjustments to identified doors to secure/latch properly.</p> <p>③ Furniture will be adjusted or removed to allow doors to latch properly.</p> <p>④ Regional MT/Designer</p>	<p>7/30/17</p> <p>immediate</p>

*[Handwritten Signature]*, ED 7/13/17

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C 189	<p>Continued From page 4</p> <p>Floors are out of square in the door frames and do not provide a tight fit to resist the passage of smoke/fire.</p> <p>5-Based on observation, this facility has failed to provide fire protection for all electrical conduit floor, ceiling and coridor wall penetrations that are fire rated roof/ceiling assemblies.</p> <p>Findings on 08/17/2017: There are electrical conduit wiring penetrations that have incomplete fire-protection at the following locations: (a) Data Closets on the First and Second Floors (b) Fire Alarm Control Panel conduits penetration the ceiling in the Main Mechanical Room.</p> <p>6-Based on observation, the facility was not maintained in a safe manner due to breaches of the one-hour roof/ceiling assembly construction that has invalidated its integrity. This could affect all residents and staff in the event that fire and/or smoke is not contained in a room or compartment of origin.</p> <p>Findings on 08/17/2017: The ceiling sheet-rock has voids from threaded rod installations and damage due to water migration in the First Floor Mechanical Room.</p> <p>7-Based on observation, this facility has failed to ensure that working clearances are maintained in front and at each side of electrical service panels.</p> <p>Finds on 08/17/2017: The access to the electrical is restriced by the washing machine at the Residential Wash Room on the Second Floor.</p> <p>8-Based on observation, this facility has failed to</p>	C 189	<p>will make adjustments/repair to tighten door fit to increase <del>smoke</del> resistance of smoke/fire passage.</p> <p>→ Regional MTF/ Designee will have penetrations filled properly.</p> <p>SD/Regional MTF will contact vendor to make necessary repairs.</p> <p>washer machine will be repositioned as to not block electrical panel.</p>	<p>9/30/17</p> <p>9/30/17</p> <p>9/30/17</p> <p>9/30/17</p>

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C 189	Continued From page 5  ensure that all rooms and spaces are free of combustible stored materials.  Finds on 08/17/2017: The are excessive combustible material stored or in place that are located in the First Floor Mechanical Room.  9-Based on observation, this facility has failed to ensure that all electrical junction and control wiring boxes are secured.  Finds on 08/17/2017: There is a junction box that does not have cover at the rear of the First Floor Mechanical Room at the ceiling elevation.  10-Based on observation, this facility has failed to maintain sprinkler head installation at all required areas.  Finds on 08/17/2017: The sprinkler heads have ecutcheons that are not in place or out of position at the following locations: (a) Dogwood Stair Tower/Second Floor (b) Spa/Second Floor  11-Based on observation, this facility has not maintained in a safe manner by improper storage of oxygen cylinders. This could affect all residents and staff by potentially exposing them to hazards for a ruptured cylinder.  Findings on 08/17/2017: There are oxygen bottles in Room 208 that are not secured to the structure or stored in approved racks.	C 189	<p>⑧ — ED/Designee will remove combustible items that are stored in excess from mechanical room.</p> <p>⑨ — Cover will be applied to said junction box.</p> <p>⑩ — ED/Regional MT will have ecutcheons installed and/or repositioned in identified areas.</p> <p>⑪ — Oxygen tanks were removed from apt 5 or store properly in crates.</p>	<p>9/30/17</p> <p>9/30/17</p> <p>9/30/17</p> <p>8/17/17</p>

 , Executive Director 9/13/17