

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL034026</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>R</b> <b>01/25/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>BRIGHTON GARDENS OF WINSTON SALEM</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2601 REYNOLDA ROAD</b> <b>WINSTON SALEM, NC 27106</b>		
(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 Biennial Follow Up Construction Survey by Dennis Harrell and Ed Miller on 1-25-2018.  Many 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: 2. Based on observation, the facility failed to meet the NC State Building Code in effect at the time of construction by not having all of the required components for doors with Special Locking System. Finding on 9-20-2017 and 11-21-2017 and 1-25-2018; There was no wiring diagram or systems components location map posted under glass at the fire alarm panel.	{C 101}			

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Michael Wilson*

TITLE

*ED*

(X6) DATE

*2-23-18*

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{C 101}	Continued From page 1  New Finding on 1-25-2018: Based on observation, the facility failed to meet the NC State Building Code regarding unobstructed access to electric panels. Obstructed electric panels would delay access to turn off electrical power in an emergency. Finding includes; A clean linen cart was stored in the second floor electrical room blocking access to to 4 electrical panels.	{C 101}		
{C 150}	Corridors-Free of equipment and Obstructions  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 other obstructions.  This Rule is not met as evidenced by: Based on observation, the corridors were not maintained free of obstructions. Corridors obstructed to less than the 6 feet width required by Code could delay or prevent an evacuation in an emergency. Findings on 9-20-2017 and 11-21-2017 and 1-25-2018: c. There were 4 chairs stored in the corridor at the beauty salon reducing the clear width to less than 4 feet.  Finding on 1-25-2018: The exit corridor by the Business Manager's office was completely blocked with a maintenance cart, another cart, a chair and a trash can. Note; This same corridor was found obstructed to less than 8 inches of clear width on	{C 150}		

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{C 150}	Continued From page 2  9-20-2017 and again on 11-21-2017.  New finding on 1-25-2018: A lift was stored in "Stair 1" on the second level reducing the clear width to about 30 inches. Nothing is allowed to be stored in stairways.	{C 150}		
{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 in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings on 9-20-2017 and 11-21-2017: a. One portable medical oxygen cylinder was stored in no rack or container in room 320. New finding on 1-25-2018: Two portable medical oxygen cylinders were stored in no rack in the front janitor's closet on the 3rd floor.  2. Based on observation, the facility was not maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability	{C 166}		

Division of Health Service Regulation


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{C 166}	Continued From page 3  of the fire sprinkler system to extinguish a fire. Findings on 9-20-2017 and 11-21-2017 and 1-25-2018: Boxes had been stacked to within 4 inches of the ceiling in the front janitor's closet on the 3rd floor.	{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: 5. 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. Findings on 9-20-2017 and 11-21-2017 and 1-25-2018; c. One of the 3/4 hour fire rated doors to the maintenance area was found tied open again. d. The edges of the 3/4 hour fire rated doors to the maintenance area had been planed off and there was now a gap of about 3/8 inch between the doors. e. The door to the sprinkler room would now latch but was propped open. g. The latchset strike was missing on the door to	{C 189}			

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{C 189}	Continued From page 4  the storage room near the Special Care laundry.  New finding on 1-25-2018; Based on observation, the fire alarm system was showing a "Trouble = 2" condition. Fire alarms in "Trouble" may fail to operate properly when needed.	{C 189}			

## Sunrise Senior Living Plan of Correction

**Name of Community:** Brighton Gardens of Winston Salem  
**Address of Community:** 2601 Reynolda Road, Winston Salem, NC 27106  
**License number:** HA1034026  
**Inspection date(s):** 1/25/2018  
**Name/Title of Legal Entity Representative Signing the Plan of Correction:**

**Signature of Sunrise Representative:**   
**Date of Submission:** 2-23-18

Regulation	Target Date by Which Correction will be completed	Plan of Correction
C 101	2/5/2018	Maintenance Coordinator (MC) has contacted Simplex fire panel vender to have new drawing created with the indication of the magnetic locks on the SCU doors.
	1/25/2018	The clean linen cart was removed immediately after the survey.
	1/25/2018	All items were removed from corridor immediately after the survey.
C 150	1/25/2018	All items were removed from corridor immediately after the survey.
	1/25/2018	All items were removed from BOC office door in hallway immediately after the survey.
	1/25/2018	Mechanical lift was removed from hallway during the survey.
C 166	2/5/2018	Identified portable medical oxygen cylinders have been stored in a rack provided by durable medical equipment company.
	2/5/2018	Boxes and items have been removed to provide 18 inches of clearance from sprinkler head.
C 189	2/5/2018	Fire rated door is closed and tie was removed. Ordered new fire door.
	1/25/2018	Door to sprinkler room was closed immediately after the survey.
	1/26/2018	The latchset strike on door was replaced.
	1/31/2018	Simplex was called and completed repairs to fix the trouble signal