

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/24/2018
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NAME OF PROVIDER OR SUPPLIER BROOKDALE FALLING CREEK	STREET ADDRESS, CITY, STATE, ZIP CODE 910 29TH AVENUE NE HICKORY, NC 28601
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C 000	<p>Initial Comments</p> <p>Report of Construction Section Biennial Survey by Dennis Harrell on 10-24-2018.</p> <p>Records indicate this facility was first licensed as a Home for the Aged on 6-11-1997. The facility is currently licensed for a total of 60 beds. Therefore, we are requiring the facility to meet the 1996 Homes for the Aged and Disabled - Minimum Standards and Regulations, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1996 Edition of the North Carolina State Building Code, Section 409.1, 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:</p> <p>1. Based on a review of documents, the required annual fire alarm system inspection report could not be located. Fire alarm systems that are not inspected and approved as required could result in the fire alarm system not operating properly in the event of an actual fire.</p> <p>2. Based on a review of documents, the most recent Fire Marshal building safety inspection report could not be located. Buildings must be inspected and approved annually as required to ensure all systems can operate properly in an actual emergency.</p>	C 111		

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

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C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p> <p>(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.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 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 10-24-2018: Several (7) portable medical oxygen cylinders were stored in an unapproved plastic crate in room 710. Based on observation, an extension cord was being used in place of permanent wiring in the maintenance office. The cord extended up through the one-hour ceiling to some location in the attic. Extension cords are intended for temporary use only and must never penetrate a wall or ceiling. Based on observation, the ice machine drain line extended into 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. 	C 166		

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C 185	Continued From page 2	C 185		
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:</p> <ol style="list-style-type: none"> Based on review of documents, fire drill rehearsals are not being done regularly with at least one per shift each quarter. Failure to rehearse the fire plan could lead to confusion and delay in an actual emergency. Findings include: <ul style="list-style-type: none"> a. In the 1st quarter of this year, there was no rehearsal done during the 1st shift. b. In the 2nd quarter of this year, there was no rehearsal done during the 2nd shift. c. In the 3rd quarter of this year, there were no rehearsals done during the 1st or 3rd shifts. d. In the 4th quarter of last year, there were no records of rehearsals. Based on a review of documents, the records available onsite included little to no description of what the rehearsal involved. 	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"> Based on observation, battery powered emergency lights would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. Mal-functioning lights include the following areas: <ul style="list-style-type: none"> a. Corridor near room 102, b. Corridor near room 702, c. Corridor near room 710, d. Two in corridor near the Activity room, e. Activity room, f. #33 in furnace room off service corridor, g. #34 in service corridor. Based on observation, a smoke barrier door is prevented from closing 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. Finding on 10-24-2018; One of the smoke barrier doors near the laundry dragged the floor and did not close and latch when activated by the fire alarm system. 	C 189		

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C 189	<p>Continued From page 4</p> <p>3. Based on observation, the required one-hour fire rated walls and/or ceilings were compromised in locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings on 10-24-2018:</p> <ul style="list-style-type: none"> a. Unfinished patch in the ceiling of the riser room, b. Unfinished patch in the wall of the spa, c. Hole in the ceiling of the maintenance office. <p>4. Based on observation the required one-hour fire rated ceilings were compromised in locations by improperly fitting sprinkler escutcheons. Improperly fitted sprinkler escutcheons present the possibility that a fire that begins in one space can quickly spread to the attic and could delay activation of the sprinkler system. Improperly fitted sprinkler escutcheons on 10-24-2018:</p> <ul style="list-style-type: none"> a. Spa, b. Kitchen. <p>5. Based on observation, 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 10-24-2018;</p> <ul style="list-style-type: none"> a. The door to bedroom 102 was wedged open. b. The door to bedroom 103 was propped open. 	C 189		