

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL018016</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/21/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BROOKDALE HICKORY NORTHEAST</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2530 16TH STREET N E HICKORY, NC 28601</b>
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller, conducted on November 21, 2018.</p> <p>Records indicate that this facility was first licensed on 5-13-1994 with an addition submitted on 6-12-1997, for the current licensed capacity of 88 residents. Based on this information, the facility is required to meet the 1993 Rules for the Licensing of Domiciliary Homes (Homes for the Aged), the applicable portions of the 2005 10A NCAC 13F - Licensing of Adult Care Homes of Seven or More Beds, and the 1991 NC State Building Code(s) for a Group I-Institutional Unrestrained Occupancy.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>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;</p>	C 101		

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

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C 101	Continued From page 1  This Rule is not met as evidenced by: 1. Based on observation, the Building does not meet code requirements for Delayed Egress Locking System, when last modified. Findings on November 21, 2018: a. Left Exit - a force greater than 15 pounds was applied to the delayed egress door's releasing device, for more than three seconds. The system did not initiate an irreversible process to release the door. The door did unlock on fire alarm system activation. Deficiency corrected before Construction Surveyors departed site.	C 101		
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, the building mechanical systems are not kept clean and in good repair. Findings on November 21, 2018: a. Entire Building - the ventilation system throughout the Facility with their radiation dampers have an excessive accumulation of dust/lint.  2. Based on Observation, and interview with	C 164		

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C 164	<p>Continued From page 2</p> <p>Manager, the facility failed to keep plumbing system devices clean and in good repair. Findings on November 21, 2018:</p> <ul style="list-style-type: none"> <li>a. Shared Bathroom between Bedrooms 1 &amp; 3 - the connection of the commode to the floor is loose.</li> <li>b. Shared Bathroom between Bedrooms 1 &amp; 3 - the shower is dirty around its built-in seat.</li> <li>c. Bedrooms 29 Bathroom - the connection of the commode to the floor is loose.</li> </ul> <p>3. Based on observation, the building Ceilings are not kept clean and in good repair. Findings on November 21, 2018:</p> <ul style="list-style-type: none"> <li>a. Bedroom 1 - the textured ceiling is detaching from the ceiling in several small areas.</li> <li>b. Laundry near Bedroom 8 - the textured ceiling is detaching from the ceiling in several areas.</li> </ul>	C 164		
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: 1. Based on Observation, the Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on November 21, 2018:</p>	C 166		

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C 166	Continued From page 3  a. Bedroom 25 - one portable medical oxygen cylinder is standing up on the floor and four portable medical oxygen cylinders are standing up in a plastic beverage crate not physical secured in racks, stands or chained to the structure.	C 166		
C 183	Fire Extinguishers  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop.  This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staffs ability to extinguish a small fire and permit it to grow larger. Findings on November 21, 2018: a. Entire Building - since the last annual maintenance, performed in August 2018, there has been no documentation of the portable fire extinguisher's monthly in-house/owner inspections. b. Activities - the last annual maintenance check of this portable fire extinguisher was last performed in June 2017. c. Beauty Shop - the last annual maintenance check of this portable fire extinguisher was last performed in June 2017.	C 183		
C 189	Building Equipment Maintained Safe, Operating	C 189		

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C 189	<p>Continued From page 4</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> <p>1. Based on observation, the building's emergency equipment was not maintained in a safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency.</p> <p>Findings on November 21, 2018:</p> <p>a. Corridor near Sales Office - the self-contained emergency light did not illuminate on backup power when the test button is pushed.</p> <p>b. Activities near Window - the self-contained emergency light did not illuminate on backup power when the test button is pushed.</p> <p>c. Corridor near Bedroom 12 - the exit sign did not illuminate on backup power when tested.</p> <p>d. Corridor near Bedroom 21 - the exit sign did not illuminate on backup power when tested.</p> <p>2. Based on observation, the facility is not maintained in a safe manner by having fire rated doors not close completely in order to contain smoke and fire. This could affect all residents and staff by not containing smoke and fire in the fire compartment of origin.</p> <p>Findings on November 21, 2018:</p> <p>a. Attic - the doors to the fire-resistance-rated furnace rooms are propped open, circumventing the fire-resistance-rated protection of the attic.</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>3. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on November 21, 2018:</p> <ul style="list-style-type: none"> <li>a. Kitchen -since the last semi-annual maintenance of the commercial kitchen hood's fire suppression system, performed in August 2017, there has been no documentation of the monthly in-house/owner inspections.</li> <li>b. Kitchen - the commercial kitchen hood's suppression system does not have a nozzle correctly aimed at the deep fryer to extinguish a fire.</li> </ul> <p>4. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on November 21, 2018:</p> <ul style="list-style-type: none"> <li>a. Corridor near Bedroom 1 - the exit sign's base does not completely cover the hole penetrating the fire-resistance-rated ceiling assembly.</li> <li>b. Kitchen Housekeeping Closet - there is a gypsum patch in the fire-resistance-rated ceiling assembly that uses mesh tape to bridge large gaps between boards. Drywall tape over a hole is not approved to firestop this type of penetration.</li> <li>c. Bulk Laundry - there is a gap around a PVC conduit not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</li> <li>d. New Basement - there are several large holes not firestopped as they penetrate the</li> </ul>	C 189		

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C 189	<p>Continued From page 6</p> <p>fire-resistance-rated ceiling assembly.</p> <p>5. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Using medical equipment, high power loads such as space heaters, refrigerators, and microwave ovens with multiple power taps can overload building wiring is a fire hazard</p> <p>Findings on November 21, 2018:</p> <p>a. Bedroom 1 - a power tap (power strip) is plugged into another power tap. Power taps must connect directly to permanently installed branch circuit electrical power receptacles. Deficiency corrected before Construction Surveyors departed site.</p> <p>b. Bedroom 3 - a power tap (power strip) is plugged into another power tap. Power taps must connect directly to permanently installed branch circuit electrical power receptacles. Deficiency corrected before Construction Surveyors departed site.</p> <p>c. Bedroom 3 - oxygen concentrator is plugged into a power tap. Deficiency corrected before Construction Surveyors departed site.</p> <p>d. Bedroom 8 - oxygen concentrator is plugged into a power tap. Deficiency corrected before Construction Surveyors departed site.</p> <p>e. Bedroom 25 - oxygen concentrator is plugged into a power tap. Deficiency corrected before Construction Surveyors departed site.</p> <p>f. Bedroom 25 - refrigerator is plugged into a power tap. Deficiency corrected before Construction Surveyors departed site.</p> <p>6. Based on observations, the Building was not maintained in a safe and operating condition, because some fire sprinkler components were missing or in despair. This could affect all residents, staff, and visitors if the fire sprinkler</p>	C 189		

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C 189	<p>Continued From page 7</p> <p>system does not function or is delayed in responding as design. Findings on November 21, 2018:</p> <p>a. FDC inlet connection area - the FDC sign has faded and the letter are not visible.</p> <p>7. Based on observations, the Building was not maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler heads' spray cannot reach all areas of a room. Findings on November 21, 2018:</p> <p>a. Supply Closet near Copy Room- items are being stored within the area 18 inches below the fire sprinkler head.</p> <p>8. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on November 21, 2018:</p> <p>a. Health &amp; Wellness Office- the corridor door has a kick down device holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch.</p> <p>9. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on November 21, 2018:</p> <p>a. Bedroom 11 - the corridor door does not latch into its frame when closed. b. Bistro - the pair of corridor doors do not latch into its frame when closed. c. Bedroom 22 - the corridor door does not have a door handle hardware to latch in its frame. d. Bedroom 29 - the corridor door does not latch into its frame when closed.</p>	C 189		