

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL014014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 02/21/2019
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NAME OF PROVIDER OR SUPPLIER BROCKFORD INN	STREET ADDRESS, CITY, STATE, ZIP CODE 56 N HIGHLAND AVENUE GRANITE FALLS, NC 28630
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C 000	<p>Initial Comments</p> <p>Report of Biennial Construction Survey by Dennis Harrell on 2-21-2019.</p> <p>Records indicate this facility was first licensed on 10-1-1977. The documents for the Special Care Unit were first submitted on 6-7-2008. Based on this information, we are requiring the older portion of the facility to meet the 1967 NC State Building Code, the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the applicable portions of the current Rules for Adult Care Homes of Seven or More Beds. The Special Care Unit was surveyed using the 2006 NC State Building Code and the current Rules for Adult Care Homes of Seven or More Beds.</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 Sanitation inspection for the building was dated 6-30-2017. Buildings must be inspected and approved annually as required.</p>	C 111		
C 160	<p>Outside Premises-Clean, Safe</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p>	C 160		

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

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C 160	Continued From page 1 (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: Based on observation, an exterior exit path was not maintained in a safe condition. Findings on 2-21-2019; a. There was standing water on the exit path from Hall 2. b. The exit path from Hall 2 was very soft and muddy.	C 160		
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 walls were not kept in good repair. Findings on 2-21-2019; a. The wall finish was water damaged in the community bathroom on Hall 3. b. An outside corner was chipped and damaged in the community bathroom on Hall 3.	C 164		

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C 166	Continued From page 2	C 166		
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"> 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 2-21-2019: <ol style="list-style-type: none"> 1. Several (8) portable medical oxygen cylinders were stored in an unapproved plastic crate. 2. One portable medical oxygen cylinder was stored in no container at all. 3. One large medical oxygen cylinder was stored without the required clamp-on base. 2. Based on observation, the ice machine drain line was in direct contact with and extended into the wall 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. 3. Based on observation, parts of the toilet paper holder were missing in the community bathroom on Hall 3. The missing parts exposed sharp edges. 	C 166		

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C 185	Continued From page 3	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: Based on a review of documents, the records available onsite included little to no description of what the rehearsal involved.</p>	C 185		
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: 1. Based on observation, the required one-hour</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>fire rated walls and/or ceilings were compromised in several 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.</p> <p>Findings on 2-21-2019:</p> <ol style="list-style-type: none"> a. Holes at water lines in the walls of the janitor's closet near the kitchen, b. Unsealed penetration at an A/C line through the ceiling of the air handling room on Hall 1, c. Unsealed penetration at an A/C line through the ceiling of the air handling room on Hall 2, d. Hole at a conduit in the ceiling of the pantry, e. Unsealed penetrations in the ceiling of the med room on Hall 3, f. Hole in the wall of the med room on Hall 3, g. Penetration in the ceiling of the med room on Hall 3 sealed with un-rated caulk, h. A sprinkler escutcheon was missing in the Maintenance office. <p>2. 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.</p> <p>Findings on 2-21-2019;</p> <ol style="list-style-type: none"> a. There is no door stop provided for the top of the door to bedroom 207. b. The door to the community bathroom on Hall 3 does not fit the opening properly to be resistant to the passage of smoke. c. The door to room 209 does not latch when closed. <p>3. Based on observation, an attic draft stop was not maintained to resist the free flow of air.</p>	C 189		

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C 189	<p>Continued From page 5</p> <p>Findings on 2-21-2019;</p> <p>a. There were unsealed wire penetrations in the draft stop wall above Hall 3.</p> <p>b. There was an unsealed conduit penetration in the draft stop wall above Hall 3.</p> <p>4. 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 of the fire sprinkler system to extinguish a fire.</p> <p>Finding on 2-21-2019;</p> <p>Items had been stacked to within 6 inches of the ceiling in the maintenance office. Note; This deficiency was corrected during the survey.</p>	C 189		