

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL018016	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 01/30/2019
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NAME OF PROVIDER OR SUPPLIER BROOKDALE HICKORY NORTHEAST	STREET ADDRESS, CITY, STATE, ZIP CODE 2530 16TH STREET N E HICKORY, NC 28601
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(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 a Biennial Follow Up Construction Survey by Ed Miller, conducted on January 30, 2019. Deficiencies were cited that will require a new Plan of Correction.	{C 000}	The following is a summary of the Plan of Correction for Brookdale Hickory NE. This Plan of Correction is in regards to the Corrective Action Report dated January 30, 2018. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.	
{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: 3. Based on observation, the building Ceilings are not kept clean and in good repair. Findings on January 30, 2019: b. Laundry near Bedroom 8 - the textured ceiling is detaching from the ceiling in several areas.	{C 164}		
{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.	{C 189}		

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

TITLE

(X6) DATE

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{C 189}	<p>Continued From page 1</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. Findings on January 30, 2019: c. Corridor near Bedroom 12 - the exit sign did not illuminate on backup power when tested. d. Corridor near Bedroom 21 - the exit sign did not illuminate on backup power when tested.</p> <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 January 30, 2019: a. Corridor near Bedroom 1 - the exit sign's base does not completely cover the hole penetrating the 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 Findings on January 30, 2019: c. Bedroom 3 - oxygen concentrator is plugged into a power tap. Deficiency corrected before Construction Surveyors departed site.</p> <p>6. Based on observations, the Building was not</p>	{C 189}	<p>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>Ceiling & vents in laundry room near Apt #8 were repaired and painted and detaching texture was removed and new textured added. Completion date 3/8/19.</p> <p>Executive Director or designee will inspect periodically during walking rounds to ensure compliance.</p> <p>10A NCAC 13F .0311 PHYSICAL PLANT/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. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p>	3/8/19

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{C 189}	<p>Continued From page 2</p> <p>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 system does not function or is delayed in responding as design. Findings on January 30, 2019: a. FDC inlet connection area - the FDC sign flips over base of wind directions. Secure sign so that it is visible to the arriving fire trucks.</p> <p>9. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on January 30, 2019: a. Bedroom 11 - the corridor door does not latch into its frame when closed. b. Bistro - the active leaf of the pair of corridor doors does not latch into its frame when closed.</p>	{C 189}	<p>Corridor near Apt #12 and corridor near Apt #21 exit signs did not illuminate on backup power when tested. Maintenance Technician changed the batteries and bulbs at both corridor exit signs. They were tested and are in working order. Completion date 2/1/19.</p> <p>Corridor near Apt #1 - exit sign's base does not completely cover the hole penetrating the fire-resistance-rated ceiling assembly. Maintenance Technician applied fire caulk around the exit sign base sealing the hole. Completion date 2/1/19.</p> <p>Apt #3 - oxygen concentrator is plugged into a power tap . Deficiency corrected before Construction surveyors departed site. Maintenance Technician educated staff during morning stand up meetings and at the all staff meeting in February to check apartments as they are in and out for continued compliance. This was also discussed in resident council in February to educate residents on rules and regulations. Completion date 2/28/19.</p> <p>FDC inlet connection area - the FDC sign flips over base of wind directions. Secure sign so that it is visible to the arriving fire trucks. Maintenance Technician drilled holes and secured the sign with wire ties. Completion date 2/1/19.</p> <p>Apartment #11 door wouldn't latch. Maintenance Technician adjusted door and door now latches. Completion date 2/1/19.</p> <p>Bistro door would not latch. Maintenance Technician adjusted door and door now latches. Completion date 2/1/19.</p> <p>Executive Director or designee will inspect periodically during walking rounds to ensure compliance.</p>	<p>2/1/19</p> <p>2/1/19</p> <p>2/28/19</p> <p>2/1/19</p> <p>2/1/19</p>
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Business Office Coordinator
Ruinder Adams
for Kim Harris, ED
3/12/19