

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL065019	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 02/14/2019
NAME OF PROVIDER OR SUPPLIER BROOKDALE WILMINGTON		STREET ADDRESS, CITY, STATE, ZIP CODE 3501 CONVERSE DRIVE WILMINGTON, NC 28403		
(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 Suzanna Fay conducted on February 14, 2019. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.	{C 000}		
{C 111}	Must Have Current San. & Fire Safety Reports 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. This Rule is not met as evidenced by: 1. Review of records revealed that the current sanitation and fire and building safety inspection reports were not available for review. Findings on February 14, 2019: a. Current copies of sanitation, fire and building safety inspection reports were not available for review. All available documents were for the year 2017. Documents that were not available include: 1) Annual Sanitation inspection report for the building. 2) Annual Sanitation inspection report for the kitchen. 3) Annual inspection report from the local fire official. 4) Annual Fire Alarm System inspection report. 5) Annual Fire Sprinkler System inspection report.	{C 111}	Have reached out to GM during hurricane Florence evac. for inspection reports. Waiting for them to be sent to Community.	5-1-19

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

Enlight

Executive Director 4-5-19

6899

U29B22

If continuation sheet 1 of 3

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{C 189}	Continued From page 1	{C 189}			
{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: 2. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on February 14, 2019: h. Unassisted Dining Room - one of the sprinkler heads near the side wall has dropped down approximately 4" below the ceiling. The dropped heads require further action by the sprinkler contractor. i. Private Dining - one of the sprinkler heads has dropped down approximately 1 1/2" below the ceiling. The dropped heads require further action by the sprinkler contractor. j. D Hall bath - one of the sprinkler heads is missing an escutcheon plate and the head is heavily rusted. The dropped heads require further action by the sprinkler contractor. k. D Hall Furnace Closet - there are two large holes cut into the ceiling to conduct repairs. The holes were patched but were sealed with orange	{C 189}	Having difficulty reaching BFPE to return to Complete Services. Will reach out again to follow-up.	5-1-19	

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{C 189}	Continued From page 2 foam which does not meet the fire resistant rating required for the ceiling construction in this facility.	{C 189}	This foam used was in compliance with fire codes according to the contractor that performed the service (TA Woods).		5-1-19