

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 07/17/2019
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NAME OF PROVIDER OR SUPPLIER BROOKDALE REYNOLDA ROAD	STREET ADDRESS, CITY, STATE, ZIP CODE 2980 REYNOLDA ROAD WINSTON SALEM, NC 27106
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C 000	<p>Initial Comments</p> <p>Report of Construction Section Biennial Survey by Dennis Harrell and Ed Miller on 7-17-2019.</p> <p>Records indicate that this facility was first licensed on 7-2-1996, for 72 beds. Based on this information, the facility is required to meet the 1996 Minimum Standards and Regulations for Homes for the Aged and Disabled; the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds; and the 1996 North Carolina State Building Code Section 409.1-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: Based on a review of documents, the most recent sprinkler system inspection report dated 6-13-19, listed several deficiencies. No subsequent documentation was available to indicate the deficiencies had been corrected.</p>	C 111	Requested 2nd Quote from Johnson Controls. He came out to assess for all repairs and replacements and will send quote to MT. Once received will send up for the approval of the RMT and DDO.	Complete before 8-31-19
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>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;</p>	C 164		

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

TITLE

(X6) DATE

Hubert Adams

Executive Director

8-7-19

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C 164	Continued From page 1 (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 building mechanical systems are not kept clean and in good repair. Findings on 7-17-2019: The HVAC exhaust grill and radiation damper in the storage room off the laundry had an excessive accumulation of dust/lint.	C 164	Cleaned and ensure regular scheduled cleaning is in place	Complete on 7-18-19
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (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. This Rule is not met as evidenced by: 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 7-17-2019: Several (5 regular and 8 small) portable medical oxygen cylinders were stored in unapproved plastic crates in room 35.	C 166	Plastic crates were provided by oxygen company for safe storage. Requested delivery of metal crates on 8-7-19	complete by 8-31-19

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C 166	Continued From page 2 2. Based on observation, the building was not maintained in a safe manner because of trip and/or fall hazards on exterior decks, steps and porches. Findings on 7-17-2019; a. Items (cans, bottles, trash can components) were left scattered on the basement deck and steps causing a trip and fall hazard. b. Foam seat cushions (7) were left on the rear steps from the dining room causing a fall hazard. c. One of the step treads on the rear steps from the dining room was loose and warped upwards causing a trip hazard. d. The handrail on the porch and steps from the kitchen were very loose causing a fall hazard.	C 166	a. All items removed from steps b. cushions were removed from steps c. Loose step has been repaired d. Awaiting quote from contractor to rebuild steps at kitchen. Will be complete	completed on 7-17-19 completed on 7-17-19 completed on 7-18-19 Complete by 8-31-19
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (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. (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. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. 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	C 185	Have began alternating shifts each month for fire drills	complete on 8-1-19

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C 185	Continued From page 3 delay in an actual emergency. Findings on 7-17-2019: a. In the 1st quarter of this year, there were no rehearsals done during the 1st and 3rd shifts. b. In the 2nd quarter of this year, there were no rehearsals done during the 1st and 3rd shifts. c. In the 4th quarter of last year, there was no rehearsal done during the 1st shift. 2. Based on a review of documents, the records available onsite included little to no description of what the rehearsal involved.	C 185		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by: Based on observation, GFCI type receptacles would not reset. GFCI type receptacles that do not work properly present the hazard of serious electrical shock or electrocution. Findings on 7-17-2019; a. The GFCI type receptacle outside the exit near room 34 would not reset to normal operation. b. The GFCI type receptacle on the beverage counter in the dining room would not reset to normal operation.	C 188	a. and b. Receptacels replaced	complete on 7-29-19
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189		

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C 189	<p>Continued From page 4</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the required one-hour 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. Findings on 7-17-2019: a. Hole in the ceiling at a smoke detector in the foyer, b. Hole in the ceiling at a smoke detector near the ED office, c. Holes in the walls and the ceiling of the main electrical room, d. Air transfer grill, 8 inches by 8 inches, through the corridor wall above the door to the "Health Care Coordinator" office, e. Sprinkler escutcheon not tightly fitted to the ceiling in the kitchen.</p> <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. Findings on 7-17-2019; a. The double doors to the dining room are not</p>	C 189	<p>a. and b. Advanced Fire came and repaired holes on 8-7-19</p> <p>c. Filled holes in main electrical room</p> <p>d. Ordered fire damper will be installed upon delivery</p> <p>e. tightened up escutcheon</p>	<p>Completed on 8-7-19</p> <p>Completed on 8-9-17</p> <p>Complete by 8-31-19</p> <p>completed on 8-1-19</p>

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C 189	Continued From page 5 equipped with the proper hardware to allow them to automatically latch when closed. b. The 3/4 hour fire rated door from the kitchen to the dining room will not latch when closed. c. The door to the pantry, which is larger than 100 feet square, was tied open with a bungee cord. 3. Based on observation, the combination battery powered emergency light and exit sign in the kitchen would not work on battery when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff. 4. Based on observation, the exit sign in the corridor near the public restroom would not work on battery when tested. Exit signs that will not work properly for at least 90 minutes could endanger the residents and staff. 5. Based on observation, there was no documentation of the required in house/owner's monthly inspections for May and June of this year on the fire extinguishers. Fire extinguishers must be inspected monthly and the inspections must be documented somewhere such as on the tag provided on the extinguisher. 6. Based on observation, the facility was not maintained in a safe condition because of improper storage directly in front of an electrical panel in the kitchen. Storage in front of electric panels could delay access to the panel to kill power in an electrical fire.	C 189	a. Hardware installed b. Repaired strike pad c. Removed bungee cord replaced sign replaced battery inspections up to date and scheduled Removed storage in front of panel and educated staff on requirements	completed on 7-31-19 completed on 7-25-19 completed on 7-17-19 completed on 8-1-19 completed on 8-1-19 completed on 7-18-19 completed on 7-17-19
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT	C 191		

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PRINTED: 07/31/2019
FORM APPROVED

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C 191	<p>Continued From page 6</p> <p>10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances.</p> <p>(2) Unvented fuel burning room heaters and portable electric heaters are prohibited.</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: Based on observation the facility failed to adhere to the prohibition of portable electric heaters. Portable electric heaters are a potential fire hazard and as such could affect all occupants of the facility. Findings on 7-17-2019: a. There was a portable electric heater found in the "Business Office Coordinator". b. There was a portable electric heater found in the "Community Sales Rep".</p>	C 191	<p>a. and b. removed heaters from office and educated staff on the prohibition of portable electric heaters.</p>	<p>completed on 7-17-19</p>