

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032065	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 09/05/2019
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NAME OF PROVIDER OR SUPPLIER BROOKDALE DURHAM	STREET ADDRESS, CITY, STATE, ZIP CODE 4434 BEN FRANKLIN BOULEVARD DURHAM, NC 27704
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{C 000} Initial Comments

Report of a Biennial Follow Up Construction Survey by Suzanna Fay conducted on September 5, 2019.

There are deficiencies cited in the Biennial Construction Survey that remain to be corrected.

{C 000}

{C 153} Exit Door Locks-Single Hand Motion

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F .0305 PHYSICAL ENVIRONMENT
(h) The requirements for outside entrances and exits are:
(3) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys; and

{C 153}

This Rule is not met as evidenced by:
1. Observations revealed that all exit doors were not maintained easily operable. Exit doors that are damaged or difficult to operate impede the ability to exit the building in a safe manner.

Findings on September 5, 2019:
a. First Floor Front Stairwell Exit - the door to the exterior is damaged around the hinge requiring excessive force to open the door. The door has extensive repairs needed and the facility has determined that it needs to be replaced which requires additional time to complete.

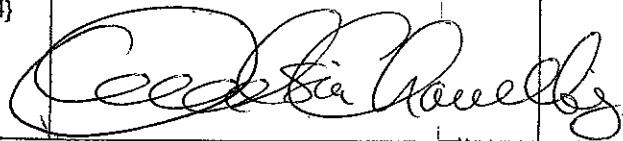
C 153 Exit door damage will be repaired. Maintenance team to ensure all exit doors is easily operable

12/31/2019

{C 164} Housekeeping and Furnishings-Clean, Repaired

SECTION .0300 - PHYSICAL PLANT
10A NCAC 13F .0306 HOUSEKEEPING AND

{C 164}



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

TITLE Qudsia Chaudhary (X6) DATE

Executive Director 9/23/2019

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{C 164}	<p>Continued From page 1</p> <p>FURNISHINGS</p> <p>(a) Adult care homes shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the ceilings were not kept clean and in good repair.</p> <p>Findings on September 5, 2019:</p> <p>b. The ceiling around the supply vent outside of Room 303 has water stains and the finish is splitting.</p> <p>d. Kitchen - a number of the ceiling tiles were warped and no longer fitting into the grid leaving holes and gaps in the ceiling. A section of the ceiling grid was missing at the entrance to the dish washing area. Interview with staff revealed that they are aware of the damaged tiles and are looking at a full replacement which has not been approved by the corporate office at this time.</p> <p>3. Observations revealed that the walls were not kept clean and in good repair.</p> <p>Findings on June 14, 2019:</p> <p>a. Third Floor Residential Laundry - the wall behind the washer and dryer units is in the process of being repaired. The walls have unfinished patches, are partially painted and the housing for the water lines is not affixed to the wall. The facility has contracted with painters who are currently on site to complete this work.</p> <p>b. Second Floor Residential Laundry - the wall behind the washer and dryer units is in the</p>	{C 164}	<p>C 164</p> <p>1b. Ceiling around the supply vent by apartment 303 will be repaired by Maintenance</p> <p>1d. Ceiling tiles in kitchen will be changed out to avoid hold gaps in the missing ceiling grid. Will be corrected by Maintenance</p> <p>3a. Repairs in 3rd floor main lobby will be replaced by vendor</p> <p>3b. Repairs in 2nd floor laundry room will be finished</p>	<p>10/31/2019</p> <p>10/31/2019</p> <p>10/31/2019</p> <p>10/31/2019</p>

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{C 164}	Continued From page 2 process of being repaired. The walls have unfinished patches, are partially painted and the housing for the water lines is not affixed to the wall. The facility has contracted with painters who are currently on site to complete this work. c. Room 219 - the kitchen base cabinets have been removed leaving a large hole in the wall that has not been repaired. This room is being renovated and the repairs are not complete. d. First Floor Residential Laundry - the wall behind the washer and dryer units is in the process of being repaired. The walls have unfinished patches, are partially painted and the housing for the water lines is not affixed to the wall. The facility has contracted with painters who are currently on site to complete this work. e. Room 105 Bath - the wall above the toilet had a prior leak and the paint is bubbled up. This has not been repaired and will be included in the painting contract which is currently in progress. f. Utility Room by Kitchen - there was a large area of roach droppings at the top of the pilaster that has not been cleaned since the previous survey.	{C 164}	3c. Apartment 219 Large hole in wall will be repaired 3d. Repairs on 1 st floor Laundry room will be completed by Maintenance 3e. Leak will be repaired, paint will be redone. 3f. Roach dropping will be removed by Staff and ED will ensure routine pest control service continue to provide service in the community per contract. All pests siting will be recorded	10/31/2019 10/31/2019 10/31/2019 10/31/2019
{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:	{C 166}		

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{C 166}	Continued From page 3 3. Observations revealed that the facility was not maintained free of hazards. Findings on September 5, 2019: a. SCU - the endcaps on the door pushbar is missing at the back exit stair leaving sharp metal edges exposed. Interview with staff revealed that the required parts were on order. b. SCU - the endcaps on the door pushbar is missing at the exit by Room 109 leaving sharp metal edges exposed. Interview with staff revealed that the required parts were on order.	{C 166}	C 166 3a. End caps will be ordered and installed on the door push bar on back of exit stairs by Maintenance. 3b. End caps on door push bar by Apartment109 will be installed by Maintenance.	10/31/2019 10/31/2019
{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: 1. 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 September 5, 2019: n. Second Floor Wellness Office - there is a 1" hole cut in the ceiling for a cable penetration by the windows. The hole was sealed using orange	{C 189}	C 189 1n. All gaps, holes and escutcheon plates will be replace by maintenance.	10/31/2019

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{C 189}	<p>Continued From page 4</p> <p>foam which is not an acceptable fire rated material.</p> <p>q. Second Floor Electrical Room by front stair - some of the fire caulk is falling out of the cable penetrations. The penetrations need additional fire caulk.</p> <p>v. Utility Room by Kitchen - there is a leak at the light leaving a 1" hole and a black stain on the ceiling. This has not been corrected.</p> <p>2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition as evidenced by doors with inoperable automatic self closing hardware. Occupants of the facility could be effected if rooms required to have self closing hardware did not close to limit smoke or the spread of fire to the area of origin.</p> <p>Findings on September 5, 2019:</p> <p>b. Third Floor Carpet Extractor Room - the closer bar was removed from the door closer and the room has a 1 hour rating. This has not been corrected.</p> <p>c. Second Floor Storage Room across from Room 220 - the door closer has been disabled on the rated door. This has not been corrected.</p> <p>4. Observations revealed that the electrical equipment was not maintained in a safe and operating condition.</p> <p>Findings on September 5, 2019:</p> <p>b. Third Floor Residential Laundry - the dryer outlet is not secure. The dryer has been disconnected until the outlet can be secured.</p> <p>e. Courtyard - none of the exterior GFCI outlets tripped when tested except for the one by the front door. Interview with staff revealed that they have not been able to determine the main ground</p>	{C 189}	<p>1q-1v. All gaps, holes and escutcheon plates will be replaced by maintenance.</p> <p>2b. Closer bar will be re-installed on door.</p> <p>2c. The door closer will be repaired by maintenance.</p> <p>4b. The dryer outlet will be secured</p> <p>4e. GFCI outlets will be tested to ensure the trip when tested</p>	<p>10/31/2019</p> <p>10/31/2019</p> <p>10/31/2019</p> <p>10/31/2019</p>

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{C 189}	<p>Continued From page 5</p> <p>fault location needed to correct the deficiency.</p> <p>f. SCU Courtyard - the GFCI outlet did not trip when tested. This item has not been corrected.</p> <p>g. SCU Activity Room - the cover plate is broken at the electrical outlet by the courtyard exit. This item has not been corrected.</p> <p>6. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin.</p> <p>Findings on September 5, 2019:</p> <p>d. Dining Room - the double doors are missing the latching hardware and the door panels are open where the hardware was removed compromising their UL rating. Interview with staff revealed that the doors will need to be replaced and that requires a long lead time.</p> <p>7. Observations revealed that the plumbing equipment was not maintained in a safe and operating condition.</p> <p>Findings on September 5, 2019:</p> <p>a. Second Floor Spa - the cover plate for the shower control is missing leaving a hole in the shower wall for water to penetrate. The cover plate is still missing.</p> <p>9. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the</p>	{C 189}	<p>4f. GFCI will be inspected and repaired as needed to ensure it trips when tested.</p> <p>4g. Cover plate will be replaced.</p> <p>6d. Doors will be ordered to ensure latching hardware latch when doors are closed.</p> <p>7a. Cover plate will be installed.</p>	<p>10/31/2019</p> <p>10/31/2019</p> <p>12/31/2019</p> <p>10/31/2019</p>

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{C 189}	Continued From page 6 spread of smoke and/or fire to the area of origin. Findings on September 5, 2019: c. Dining Room - the double doors leading to the corridor were held open with wedged devices at the time of the follow up survey.	{C 189}	9c. Wedged device has been removed from Dining Room doors	09/05/2019
{C 199}	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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: 1. Observations revealed that the facility did not provide exhaust ventilation in required areas. Findings on September 5, 2019: b. Room 334 - the bathroom fan is not pulling. e. First Floor Residential Laundry - the exhaust fan is not working. f. Staff Bathroom in the Service Hall - the exhaust fan is not working. g. Utility Room by Kitchen - the exhaust fan is not working.	{C 199}	C 199 1b-1g. All exhaust fan will be repaired and in working condition. Vendor will repair and maintenance will ensure ongoing compliance with routine checks.	10/31/2019

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{C 199}	Continued From page 7 j. Room 118 - the exhaust fan in the bathroom is not working. k. SCU Residential Laundry - the exhaust fan is not working.	{C 199}	1j-1k. All exhaust fan will be repaired and in working condition. Vendor will repair and maintenance will ensure ongoing compliance with routine checks.	10/31/2019