

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032016	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/23/2019
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NAME OF PROVIDER OR SUPPLIER BROOKDALE CHAPEL HILL AL (NC)	STREET ADDRESS, CITY, STATE, ZIP CODE 2220 FARMINGTON DRIVE CHAPEL HILL, NC 27514
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C 000	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Ed Miller and Dennis Harrell, conducted on October 23, 2019.</p> <p>Records indicate that this facility was licensed on 01/10/1997. The facility is currently licensed for 70 Beds. Therefore, the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 101	<p>Existing Licensed Fac- No less than '71 Rules</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost;</p>	C 101		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

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C 101	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, and interview with Staff in Charge and Maintenance Director, the facility, which was equipped with Delayed Egress on the exit doors, failed to meet the requirements as defined by the NC State Building Code, which permits the installation of Delayed Egress on exit doors of buildings that are protected throughout, by an approved supervised automatic fire detection system or an automatic sprinkler system. In buildings that are not protected throughout, there could be a dangerous delay in detecting the start of a fire Findings on October 23, 2019: a. D Wing Beauty Shop - there is no automatic fire detection in padlocked closet.</p> <p>2. Based on observation and interview with Maintenance Director, the facility failed to meet the Code requirements in effect at the time of construction or alteration by not having all the required components for doors equipped with Delayed Egress locking arrangements. This could affect all by potentially delaying exiting in an emergency for more than an acceptable time. Findings on October 23, 2019: a. A Wing Therapy - the delayed egress locked door does not have the required, readily visible sign mounted on the door near the release device that reads "PULL UNTIL ALARM SOUNDS. DOOR CAN BE OPENED IN 15 SECONDS".</p>	C 101		
C 111	<p>Must Have Current San. & Fire Safety Reports</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(</p>	C 111		

Division of Health Service Regulation

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C 111	<p>Continued From page 2</p> <p>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:</p> <p>1. Based on record review, and interview with Staff in Charge and Maintenance Director the facility failed to maintain in the facility, current (completed within the last twelve months) annual inspection report(s) required by this Rule. Findings on October 23, 2019:</p> <p>a. The last annual Fire Sprinkler System Inspection, Testing, and Maintenance in accordance with NFPA 25, available for review, was performed in October 2, 2018, exceeding the requirement to have the system inspected and tested at least annually to ensure that the system works properly.</p>	C 111		
C 133	<p>Bathrooms-Hand Grips</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(e) The requirements for bathrooms and toilet rooms are:</p> <p>(6) Hand grips shall be installed at all commodes, tubs and showers used by or accessible to residents;</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the facility failed to provide all tubs accessible to residents with hand grips. This deficiency affects all residents who use these fixtures by not providing increased safety, controlled against instability/balance, and maneuverability at the fixtures. Findings on October 23, 2019:</p>	C 133		

Division of Health Service Regulation

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C 133	Continued From page 3 a. All Tub/Shower Rooms - the tubs do not have a hand grip (grab bar).	C 133		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that resident toilet rooms and bathrooms are not utilized for storage or purposes other than those indicated in the Rule. This deficiency affects all residents and staff who would not have the fixtures and/or space for the services needed. Findings on October 23, 2019: a. All central Tub/Shower Rooms - these areas are being utilized to store supplies, wheelchairs doors plastic storage containers and other devices.	C 135		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, corridors are not free of obstructions. This would affect all residents,	C 150		

Division of Health Service Regulation

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C 150	Continued From page 4 staff, and visitors by slowing or obstructing egress during an emergency. Findings on October 23, 2019: a. B Wing Corridor near Kitchen- there is an unattended medication cart, obstructing the required six feet width corridor. b. B Wing Exit Vestibule - there is an unattended housekeeping cart, obstructing access to the exit.	C 150		
C 156	Soil Utility Room SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (j) Soil Utility Room. A separate room shall be provided and equipped for the cleaning and sanitizing of bed pans and shall have handwashing facilities. This Rule is not met as evidenced by: 1. Based on Observation, the building is not equipped for the cleaning and sanitizing of bed pans. Findings on October 23, 2019: a. E Wing Housekeeping - the clinical sink has been removed.	C 156		
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	C 164		

Division of Health Service Regulation

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C 164	<p>Continued From page 5 facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on October 23, 2019:</p> <p>a. E Wing Med Room - the HVAC return with its radiation damper has an excessive accumulation of dust/lint.</p> <p>b. B Wing Kitchen - the HVAC return with its radiation damper has an excessive accumulation of dust/lint.</p> <p>2. Based on Observation, the facility failed to keep plumbing system devices clean and in good repair. Findings on October 23, 2019:</p> <p>a. D Wing Tub/Shower Room Commode Room - this room had its commode removed.</p>	C 164		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on Observation, the Building was not maintained free of hazards, if compress gas cylinders fall, breaking their valves, propelling the</p>	C 166		

Division of Health Service Regulation

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C 166	<p>Continued From page 6</p> <p>cylinder, and turning it into a dangerous projectile. Findings on October 23, 2019:</p> <p>a. Bedroom E-6 - a total of 10 portable oxygen cylinders are standing up on the floor either in a cardboard or plastic beverage crate not physically secured in racks, stands or chained to the structure.</p> <p>b. E Wing Tub/Shower Room - one portable oxygen cylinder is standing up on the floor not physically secured in a rack, stand or chained to the structure.</p> <p>c. Bedroom A-7 - eight portable oxygen cylinders are standing up on the floor in a plastic beverage crate not physically secured in racks, stands or chained to the structure.</p> <p>d. Bedroom A-4 Closet 1 - one portable oxygen cylinder is standing up on the floor not physically secured in rack, stand or chained to the structure.</p> <p>e. Bedroom A-4 - one portable oxygen cylinder is standing up on a shelf not physically secured in rack, stand or chained to the structure.</p> <p>2. Based on Observation, the facility failed to keep plumbing system devices clean and in good repair. Findings on October 23, 2019:</p> <p>a. E Wing Tub/Shower Room Commode Room - the connection of the commode to the floor is loose.</p> <p>b. Bedroom E-1 Bathroom - the shower in this room is missing its shower head.</p> <p>c. F Wing Mop Room near Kitchenet - the ice machine drain line is below the flood rim of the drainage system device (no air gap). This allows contaminated water from the drainage system to back flow up into the ice machine.</p> <p>3. Based on observation, the building walls are not kept clean and in good repair. Findings on October 23, 2019:</p>	C 166		

Division of Health Service Regulation

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C 166	Continued From page 7 a. E Wing Housekeeping - there is a large hole in the wall near where the clinical sink was removed. b. E Wing Laundry Room Vestibule Furnace Room - there is a hole in the wall behind a pipe.	C 166		
C 183	Fire Extinguishers SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS (a) At least one five pound or larger (net charge) A-B-C type fire extinguisher is required for each 2,500 square feet of floor area or fraction thereof. (b) One five pound or larger (net charge) A-B-C or CO/2 type is required in the kitchen and, where applicable, in the maintenance shop. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to properly maintain the fire extinguishers and associated equipment. This could hamper staff's ability to extinguish a small fire and permit it to grow larger. Findings on October 23, 2019: a. D Wing Laundry - since the last annual maintenance, performed in May 2019, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections. b. A Wing Storage - since the last annual maintenance, performed in May 2019, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections. c. A Wing Therapy - since the last annual maintenance, performed in May 2019, there has been no documentation of the portable fire extinguishers monthly in-house/owner inspections.	C 183		

Division of Health Service Regulation

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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:</p> <p>1. Based on Record review and interview with Staff in Charge and Maintenance Director, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter.</p> <p>Findings on October 23, 2019:</p> <p>a. In the 2nd quarter for the last 12 months, no rehearsal occurred during 2nd shift.</p> <p>b. In the 3rd quarter for the last 12 months, no rehearsals occurred during 1st and 2nd and 3rd shifts.</p> <p>2. Based on Record review of the last 12 months of rehearsals, and interview with Staff in Charge and Maintenance Director the Facility failed to fully document a short description of what the rehearsal involved.</p> <p>Findings on October 23, 2019:</p> <p>a. The rehearsal records do not provide a short description of what the rehearsal involved for some the rehearsals.</p>	C 185		

Division of Health Service Regulation

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C 189	Continued From page 9	C 189		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>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.</p> <p>This Rule is not met as evidenced by: 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 October 23, 2019: a. E Wing Exit near Bedroom E-1 - the exit sign does not illuminate on backup power when tested. b. F Wing Kitchenet - Both exit sign does not illuminate on backup power when tested. c. F Wing Exit vestibule - the exit sign does not illuminate on backup power when tested. d. F Wing Exit near Bedroom F-5 - the exit sign does not illuminate on backup power when tested. e. C Wing near Elevator - the exit sign on the pair of doors does not illuminate on backup power when tested</p> <p>2. 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.</p>	C 189		

Division of Health Service Regulation

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C 189	<p>Continued From page 10</p> <p>Findings on October 23, 2019:</p> <p>a. All Furnace Rooms in Laundry Vestibule - most PVC flues are not properly firestopped with a fire collar, as the flues penetrate the one-hour fire fire-resistance-rated ceiling assembly. NOTE: PVC flues larger than 2 inches in diameter require a 'fire collar' or similar system for protection.</p> <p>b. The fire alarm panel shows a trouble signal. The trouble code corresponded to a E Wing Stair smoke detector.</p> <p>c. D Wing Maintenance Office - there are two cable bundles penetrating the fire-resistance-rated ceiling that are partially sealed with fire sealant.</p> <p>d. F Wing Kitchenet Furnace Room - there is a hole on not covered by the fire collar on the flue that is penetrating the fire-resistance-rated ceiling.</p> <p>e. F Wing near Central Stairway - there is a gap at the base of the exit sign not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>f. A Wing Laundry Room - the access door to the ceiling is ajar. Deficiency corrected before Construction Surveyors departed site.</p> <p>g. A Wing Furnace Room in Laundry Vestibule - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>h. A Wing Furnace Room in Laundry Vestibule - there are penetrations sealed with orange foam. This orange foam is not approved for penetrations through fire-resistance-rated construction.</p> <p>i. A Wing Porch - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly.</p> <p>j. B Wing FACP Room - there are four open-ended sleeves with cable bundles not firestopped as they penetrate the</p>	C 189		

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C 189	<p>Continued From page 11</p> <p>fire-resistance-rated ceiling assembly.</p> <p>k. C Wing Furnace Room in Laundry Vestibule - there are penetrations sealed with orange foam. This orange foam is not approved for penetrations through fire-resistance-rated construction.</p> <p>3. Based on observation, the Fire Alarm system was not maintained in a safe and operating condition. This would affect all by not providing early detection and activating the fire alarm system. Findings on October 23, 2019: a. Newly installed Duct Detectors throughout the Building - the HVAC duct mounted smoke detectors had no access doors to inspect and clean the duct detector's sample tubes. Dirty sampling tube may become obstructed and may not detect the existence of smoke in the air stream.</p> <p>4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on October 23, 2019: a. D Wing Tub/Shower Room - the electric baseboard heater is damaged, exposing energized components and sharp edges. b. F Wing Kitchen - the light fixture is not secured to the ceiling. c. Bedroom A-7 - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. d. Bedroom B-6 - two multiple plug adaptors, without integral overcurrent protection, are attached to two electrical power receptacles. e. B Wing Kitchen Service Hall - a cart is stored in front of the electrical panel, limiting the required 36-inches by 30-inches minimum clear working</p>	C 189		

Division of Health Service Regulation

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C 189	<p>Continued From page 12</p> <p>space.</p> <p>f. B Wing staff Lounge - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle.</p> <p>g. B Wing staff Lounge - there is an electrical power receptacle missing its cover plate.</p> <p>5. Based on observation, the smoke tight corridor walls and doors are not maintained in a safe and operating condition. Findings on October 23, 2019:</p> <p>a. E Wing Stair Vestibule - the wall is missing a cover plate over and opening.</p> <p>b. E-Wing Dining - the pair of corridor doors close, but do not latch into their frame.</p> <p>c. F Wing Laundry - the corridor door handle is broken and may not function properly when used.</p> <p>d. Bedroom B-2 - the corridor door is missing its strike plate; therefore, the door cannot latch into its frame to be smoke tight.</p> <p>e. B Wing Kitchenet - the corridor door hits its frame requiring more effort and/or force to close the door.</p> <p>f. B Wing Main Electrical Room - the wall has many holes and is not smoke tight.</p> <p>g. C Wing Laundry - the rated door's strike plate is filled with toilet paper owel preventing the door from latching.</p> <p>6. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke due to door leaves not fitting into their frames with acceptable gaps under normal operating conditions. This could affect all residents, staff, and visitors if the doors did not contain smoke/fire in the room of origin. Findings on October 23, 2019:</p> <p>a. D Wing Laundry vestibule - the corridor door assembly has a zero to ¼ inch gap between the</p>	C 189		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL032016	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/23/2019
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C 189	<p>Continued From page 13</p> <p>top edge of the door leaf and the bottom of the doorframe's stop.</p> <p>b. Bedroom C-5 - the corridor door assembly has a zero to ¼ inch gap between the top edge of the door leaf and the bottom of the doorframe's stop.</p> <p>7. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the room of origin.</p> <p>Findings on October 23, 2019:</p> <p>a. F Wing Kitchenet Furnace room - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>b. F Wing Club Room - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>c. A Wing Corridor near Tub/Shower Room - the escutcheon plate on the fire sprinkler does not cover the complete hole through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>d. Bedroom A-4 Closet 2 - the escutcheon plate on the fire sprinkler has dropped from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p> <p>e. C Wing Living Storage - the fire sprinkler is missing its escutcheon plate, exposing an opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat.</p> <p>f. C Wing Private Dining - the escutcheon plate on the fire sprinkler has dropped from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat.</p>	C 189		

Division of Health Service Regulation

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C 189	<p>Continued From page 14</p> <p>8. Based on observations, the Building is not being maintained in a safe and operating condition. The fire sprinkler heads have become obstructed. This could affect all if the fire sprinkler discharge pattern cannot reach all areas of a room.</p> <p>Findings on October 23, 2019:</p> <ul style="list-style-type: none"> a. D Wing Med Room - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. b. E Wing Housekeeping - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. c. E Wing RCC Office - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. d. F Wing Resident Program Coordinator Office - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. e. B Wing Kiechen Office - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. <p>9. Based on Observation, corridor doors are not maintained in a safe and operating condition. Doors are blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin.</p> <p>Findings on October 23, 2019:</p> <ul style="list-style-type: none"> a. E Wing Club Room near Housekeeping - the corridor door has a chair holding the door open. b. F Wing Dining - the catch plate for the electromagnetic hold open is missing and one of the pair of doors is being hold open with a door wedge. c. E Wing Club Room near Housekeeping - the 	C 189		

Division of Health Service Regulation

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C 189	Continued From page 15 corridor door has a chair holding the door open. d. F Wing Club Room - both corridor doors have a chair holding the door open. One chair had a Resident sitting in it. e. B Wing Club Room - the corridor door has a medication cart holding the door open. f. B Wing Kitchen Pantry - the rated door has a mechanical kick-down holding the door open.	C 189		
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. Based on Observation and testing with a thin plastic sheet, the facility failed to maintain the ventilation system in rooms required to be mechanically exhausted. Findings on October 23, 2019: a. E Wing Public Half Bathroom - the required exhaust ventilation system does not work. b. Bedroom A-7 - the required exhaust ventilation system does not work.	C 199		

Division of Health Service Regulation

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C 202	<p>Existing Fac. Housing Non-ambs-Hand Bells</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(j) Except where otherwise specified, existing facilities housing persons unable to evacuate without staff assistance shall provide those residents with hand bells or other signaling devices.</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: 3. Based on Observation, the call system did not provide the ability for persons unable to evacuate without staff assistance to call for assistance. Findings on October 23, 2019: a. Bedroom E-1 Bathroom - the facility has an electrically operated call system and the call system does not indicate a call when the station is activated.</p>	C 202		