

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ha1041062	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 10/24/2019
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NAME OF PROVIDER OR SUPPLIER BROOKDALE LAWDALE PARK	STREET ADDRESS, CITY, STATE, ZIP CODE 4400 LAWDALE DRIVE GREENSBORO, NC 27455
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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 24, 2019.</p> <p>Records indicate this facility was first licensed on June 2, 1997. The facility is currently licensed for 118 Beds including a 25 Bed Special Care Unit. Therefore, the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1996 Edition of the North Carolina Building Code, Institutional Occupancy.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND 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. Based on Observation, and interview with Manager, the facility failed to keep plumbing system devices clean and in good repair.</p> <p>Findings on October 24, 2019:</p> <p>a. A1 Bldg. Kitchen - the ice machine drain line</p>	C 164	<p>Community will ensure drain system has 2 inch air gap by cutting PVC pipe.</p>	12/8/19

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

TITLE

(X6) DATE

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C 164	Continued From page 1 exit port is below the flood plan of the drainage system device. Lack of a 2 inch air gap allows contaminated water from the drainage system to back flow up into the ice machine. 2. Based on Observation, the Building was not maintained free of hazards, because general maintenance was not being done or had not been completed. This could affect all residents, staff, and visitors if items are broken or partially removed and left where they could injure all. Findings on October 24, 2019: a. AI Bldg. Corridor near Bedroom 4 - picture frame mounting brackets remain attached to the wall. These brackets are rough and have sharp edges, which provides potential to cause injury.	C 164	Brackets have been removed, and the wall repaired.	11/14/19
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 kept in good repair, because some building components are broken or felled to function as original intended or are missing. Findings on October 24, 2019: a. AL Bldg. Cross-Corridor Control Doors near Vending - the front leaf is missing its end cover to the panic hardware device, exposing sharp edges	C 166	Community will replace end caps on cross-corridor control doors.	12/8/19

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STATE FORM

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If continuation sheet 2 of 10

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C 166	Continued From page 2 which provides potential to cause injury.	C 166		
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 Record review and interview with Executive Director and Maintenance Director, fire safety rehearsals are not being performed regularly with at least one per shift for each quarter. Findings on October 24, 2019: a. AL Bldg. - In the 1st quarter for the last 12 months, no rehearsal occurred during 1st shift.	C 185	Maintenance director performed audit of all fire safety rehearsals on 10/31/2019. Maintenance director will perform ongoing quarterly audits of documentation.	10/31/19
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		

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C 189	<p>Continued From page 3</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 October 24, 2019: a. AL Bldg. Veterans Community Area - the exit sign does not illuminate on backup power when tested. b. AL Bldg. Smoke Barrier near Bedroom 45 - the exit sign 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. Findings on October 24, 2019: a. AL Bldg. Vending Area - a cable with its firestopped sealant is pulled out of the fire-resistance-rated ceiling, leaving an unprotected opening. b. Al Bldg. Emergency Water Cut-off - there is a hole not firestopped as it penetrates the fire-resistance-rated ceiling assembly. c. AL Bldg. Veterans Community Area - there are gap around the base of the exit sign not firestopped as they penetrate the fire-resistance-rated ceiling assembly. d. AL Bldg. Dryer Room - the fire-resistance-rated gypsum shaft is deteriorating at the intersection with the fire-resistance-rated ceiling assembly. e. Al Bldg. Dryer Room - there is a hole with a</p>	C 189	<p>a) Community will replace batteries to exit signs.</p> <p>b)Community will replcae battery in exit sign, and repair the ceiling fire caulk.</p> <p>a) Maintenance technician filled area with fire caulk, and removed cable.</p> <p>b) Sheet rock has been replaced in emergencywater cut off closet.</p> <p>c) Community will fill hole with Fire Caulk.</p> <p>d) Vendor to replace sheet rock insullation.</p>	<p>12/8/19</p> <p>11/14/19</p> <p>11/14/19</p> <p>12/8/19</p> <p>12/8/19</p>

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C 189	Continued From page 4 gas pipe not firestopped as it penetrates the fire-resistance-rated ceiling assembly. f. AL Bldg. Mech Room near Bedroom 39 - the fire collar on the PVC flue is not secured to the one-hour fire-resistance-rated ceiling assembly. g. AL Bldg. Kitchen - there were gaps around the commercial kitchen hood's fire suppression system conduits that penetrated through the fire-resistance-rated ceiling assembly. h. AL Bldg. Kitchen Housekeeping - a conduit with its firestopped sealant is pulled out of the fire-resistance-rated ceiling, leaving an unprotected opening. i. AL Bldg. Mech Room across from Bedroom 9 - the fire collar on the PVC flue is not secured to the one-hour fire-resistance-rated ceiling assembly. j. MCU Bldg. Front Mech Room - there is a hole not sealed as it penetrates the smoke tight wall assembly. k. MCU Bldg. Laundry - there is a hole not firestopped as it penetrates the fire-resistance-rated wall assembly. 3. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on October 24, 2019: a. AL Bldg. Executive Director Office - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. b. AL Bldg. Maintenance Office - an extension cord is being used to power office equipment. Extension cords cannot substitute for permanent wiring. c. AL Bldg. Maintenance Office - an extension cord is secured to the wall. d. AL Bldg. Main Laundry - two multiple plug adaptors, without integral overcurrent protection	C 189	e) Area filled with fire caulk. f) Remounted fire collar to ceiling. g) Fire caulk applied to suppression system conduits. h) Fire caulk applied to conduit in kitchen housekeeping closet. i) Fire collar was remounted to the ceiling in AL Mechanical room. j) Repaired sheet rock in front of mechanical room. k) Repaired sheet rock behind washer. 3a) Community must purchase surge protector 3b) Community will purchase surge protector and replace c) Remove extension cord from maintenance office wall. d) Remove 2 multiplug adapter.	11/14/19 11/13/19 11/22/19 11/21/19 11/14/19 11/20/19 11/19/19 12/8/19 12/8/19 12/8/19

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C 189	Continued From page 5 are attached to two electrical power receptacles. e. AL Bldg. Corridor near Bedroom 4 - a spot light fixture is not secured to the ceiling. f. AL Bldg. Spa - the GFCI electrical power receptacle is not secured to the junction box. 4. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff, and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on October 24, 2019: a. AL Bldg. Kitchen -since August 2019, when the last semi-annual maintenance was performed on the commercial kitchen hood's fire suppression system, there has been no documentation of the monthly in-house/owner inspections. 5. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on October 24, 2019: a. AL Bldg. Maintenance Office - there is a hole through the corridor door around the door handle. b. AL Bldg. Discovery Room - this pair of corridor doors, part of a smoke resisted enclosure for the corridor, is equipped with a manual flush bolt on the inactive leaf circumventing the requirement for these doors to be have positive latching. In addition, these doors do not latch, and the active leaf hit the inactive leaf when manually closed. c. AL Bldg. Bedroom 25 - the corridor door is missing its strike plate; therefore, the door cannot latch into its frame to be smoke tight.	C 189	e) Light fixture was resecured to the ceiling. f) Community will resecure receptacle to junction box. 4a) Maintenance director will audit monthly inspections for suppression system monthly and ongoing. a)Caulk and wood-filler applied around door handle. b) Community will replace and adjust door latches. c) Strike plate was installed.	11/20/19 12/8/19. 12/8/19 11/21/19 12/8/19 11/20/19

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C 189	Continued From page 6 d. AI Bldg. Bedroom 24 - the gap between the face of the door leaf and the header stop excess the allowable gap by ¼ inches. e. AL Bldg. Private Dinning - this pair of corridor doors, part of a smoke resisted enclosure for the corridor, is equipped with a manual flush bolt on the inactive leaf circumventing the requirement for these doors to be have positive latching. In addition, these doors do not latch, when manually closed. f. MCU Bldg. Bedroom 2 - the corridor door is missing its strike plate; therefore, the door cannot latch into its frame to be smoke tight. 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 24, 2019: a. AI Bldg. Bedroom 29 - 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 header stop. b. AI Bldg. Bedroom 4 - the corridor door assembly has a zero to 1/8-inch gap between the top edge of the door leaf and the bottom of the doorframe's header stop. c. MCU Bldg. Bedroom 8 - the corridor door assembly has a zero to 1/8-inch gap between the top edge of the door leaf and the bottom of the doorframe's header stop. 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	C 189	d) Community will install weatherstrip to door header. e) Community will replace and adjust door latches. f) Strike plate installed. a-c) Community will install weatherstrip to door frame header.	12/8/19 12/8/19 11/20/19 12/8/19

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C 189	<p>Continued From page 7</p> <p>contained in the room or compartment of origin. Findings on October 24, 2019:</p> <ul style="list-style-type: none"> a. AL Bldg. Beauty Shop - 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. b. AL Bldg. Residents Half Bathroom - 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. c. AL Bldg. Veterans Community Area - 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. d. AL Bldg. Dryer Room - 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. e. AL Bldg. Housekeeping near Bedroom 45 - 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. f. AL Bldg. Break 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. g. AL Bldg. Kitchen - 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. h. AL Bldg. Kitchen Housekeeping- 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. i. MCU Bldg Smoke Barrier at Beauty Shop- the door hit is frame and will not close. 	C 189	<p>a-h) Maintenance director resecured escutcheon plates.</p> <p>i) Community will readjust door to ensure it closes properly.</p>	<p>11/21/19</p> <p>12/8/19</p>
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C 189	Continued From page 8 j. MCU Bldg Smoke Barrier at Med Room- the door is wedge open and cannot close on fire alarm activation. 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. Findings on October 24, 2019: a. Al Bldg. Maintenance Office - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. b. Al Bldg. Bedroom 18 Corridor Closet - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector. c. Al Bldg. Kitchen Storage Room - items are stored within the minimum 18-inch clearance area below the fire sprinkler deflector.	C 189	j) Maintenance director disposed of wedge. a) Maintenance director removed items from cabinets, allowing 18 inch clearance. b-c) Maintenance director will remove items room 19 corridor closet and kitchen storage room to provide 18 inch clearance below fire sprinkler deflector.	10/24/19 10/24/19 12/8/19
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)	C 199		

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C 199	Continued From page 9 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 24, 2019: a. AI Bldg. Residents Half Bathroom - the required exhaust ventilation system does not work. b. AI Bldg. Utility Room near Bedroom 49 - the required exhaust ventilation system is running but is not removing the required amount of air to dissipate the odor.	C 199	a-b) Community will replace exhaust fan motor.	12/8/19

Kristin Kiger, AED

11/26/19