STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL065019	A. BUILDING: **01** B. WING _____	**12/03/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE WILMINGTON	**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 Construction Section Biennial Survey conducted by Ryan Meyer on December 3, 2024. Records indicate this facility was first licensed on August 22, 1997 as a Home for the Aged. The facility is currently licensed as a 38 Bed Special Care Unit. 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 (!997 Revision) Edition, of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited and a Plan of Correction is required.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules 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;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation and interviews with Staff, the facility failed to meet the Code requirements in effect at the time of construction or alterations by not having all the components required and or procedures to comply and properly operate doors equipped with Special Locking. This could affect all occupants who need to evacuate through the doors. Findings on December 3, 2024: a. Fire Alarm Control Panel - the "Special Locking System" does not have an informational wiring diagram and a system components location diagram posted at the FACP including the name, location, and circuit number for the electrical panel that energizes the system. Per interview with Maintenance Director, they have contacted the installing contractor and are waiting for the Drawings.	C 101		
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 facilities. This Rule is not met as evidenced by: 1. Based on observation the facility is not	C 164		

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C 164	Continued From page 2 maintaining its floor in a safe manner. This has caused a tripping hazard. Findings December 3, 2024: a. The flooring in the Spa on the B-Hall has become discolored in multiple places. a. The flooring in room B-2 has become discolored around the toilet in the restroom.	C 164		
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: 1. Based on observation the facility is not maintaining the electrical components located near a water source in a safe manner. Findings on December 3, 2024: a. In each one of the laundry rooms throughout the facility the outlets behind the washer machine are not GFCI protected. b. The outlet behind the coffee station in the kitchen is not GFCI protected.	C 188		
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	Continued From page 3 (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 equipment systems in a safe condition. Holes or gaps at penetrations in the fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on December 3, 2024: a. Where 4" sprinkler piping had been placed through a smoke barrier wall in the riser room the large opening around the pipe that requires the proper material to seal the opening properly. b. In the main mechanical room the old fire caulk has begun to fail and needs to be replaced with the proper material. 2. Based on observation there is a failure to maintain the building's fire safety equipment systems in a safe condition. Holes or gaps at penetrations in the fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on December 3, 2024: a. In the maintenance office as well as in the corridor just outside the office there are large holes in the ceiling due to a recent sprinkler leak that needs to be repaired. b. There are multiple doors in the facility with holes that need to be filled in properly. c. The left leaf of the fire door of the C-Hall hallway has a gap at the top where the astragal has been modified. d. The sprinkler in the activity room supply closet	C 189		

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C 189	Continued From page 4 is missing its escutcheon. e. The screamer boxes over the fire alarm pull stations throughout the facility are not working. 3. Based on observation the facility is not maintaining its plumbing components in a safe manner. Findings on December 3, 2024: a The floor clean-out in the kitchen near the ice machine has come loose from the floor. 2. Based on observation and an interview with the Maintenance Director the emergency generator is not in operable condition which cannot provide emergency power when needed. Findings on December 3, 2024: a The generator is out of service due to an issue with the motor.	C 189		