STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL018016	A. BUILDING: **01** B. WING _____	R **10/22/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE HICKORY NORTHEAST	**2530 16TH STREET N E HICKORY, NC 28601**

(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 a Construction Section Biennial Follow Up Survey by Tod Hancock conducted on October 22, 2024. This facility was licensed on May 13, 1994, with an addition submitted on June 12, 1997, with the current licensed capacity of 88 residents. Based on this information, this facility is required to meet the 1993 Rules for the Licensing of Domiciliary Homes (Homes for the Aged), the applicable portions of the 2005 10A NCAC 13F - Licensing of Adult Care Homes of Seven or More Beds, and the 1991 NC State Building Code(s) for a Group I-Institutional Unrestrained Occupancy. Deficiencies were cited and a Plan of Correction required.	{C 000}		
{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 and review of records there is a failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be affected if the equipment failed to alert the occupants in case of	{C 189}		

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{C 189}	Continued From page 1 a fire. Findings on October 22, 2024: a. The Fire Alarm Control Panel is showing trouble with the tamper switch. 2. Based on observation and review of records the facility did not maintain electrical emergency/safety lighting equipment in safe operating condition. This could affect occupants of the facility if egress paths and exits were not illuminated during a power outage. Findings on October 22, 2024: a. 1st Hall-Living Room- Review of the most recent inspection and test report of the fire alarm system, the sealed lead acid battery did not pass the voltage test. 3. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Findings on October 22, 2024: a. Mechanical/Maintenance Office - Both vents in the area had the radiation dampers propped open so that they could not close during a fire.	{C 189}	Fire panel corrected by Summit Fire alarm system; Maintenance manager to perform monthly testing to ensure fire alarm system operating properly. New battery to installed by Maintenance manager; To be reinspected during annual fire inspection Maintenance manager removed items that were holding vents open. Corrected and completed	11/01/2024 01/03/2025 11/01/2024