

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL036012</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/14/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>BROOKDALE UNION</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1717 UNION ROAD GASTONIA, NC 28054</b>		
(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  This is a Report of a Biennial Construction Survey conducted by Greg Cates and Ed Miller on October 14, 2015.  Based on information gathered from our files, the Facility was first licensed on January 3, 1995 for Seventy-Eight (78) residents. Based on this information, we are requiring the original facility to meet the 1993 Rules for the Licensing of Domiciliary Homes and the 1991 North Carolina State Building Code, Section 409- Institutional Occupancy; and the applicable portions of the 2005 Rules for Adult care Home of Seven or More Beds.	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;  This Rule is not met as evidenced by: 1- Based on observations, the facility failed to	C 101		

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

TITLE

(X6) DATE

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C 101	<p>Continued From page 1</p> <p>ensure that the building meets the NC State Building Code regarding delayed egress. This deficiency directly affects all residents, personnel, and visitors who may have to exit the facility in an emergency.</p> <p>Findings on include:</p> <p>a- All EXIT doors are equipped with a 15-second delayed egress system but the doors are not labeled with the required signage designating it as delayed egress.</p> <p>b- The EXIT door (near Rooms 16/17) on the main corridor of A Wing did not release after 15 seconds.</p> <p>2- Based on observations, the facility has failed to maintain a clear EXIT path at the main entrance/ EXIT. This could affect all occupants of the facility by causing the area to be congested which could cause a delay in exiting the building in an emergency.</p> <p>Findings include:</p> <p>a- The wheelchairs and walkers during lunch were all parked, several deep, in the corridor which narrowed the accessible path to much less than 6 feet.</p> <p>3- Based on observations, the facility has failed to maintain the building as fully sprinkled. This could affect all occupants of the facility by allowing fire to build undetected.</p> <p>Findings include:</p> <p>a- The storage closet located outside the office is not equipped with a sprinkler head.</p>	C 101		

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C 164	Continued From page 2	C 164		
C 164	<p>Housekeeping and Furnishings-Clean, Repaired</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the buildings walls, ceilings, and floors in good repair and clean.</p> <p>Findings include:</p> <p>a- The main corridor walls in the central entry are scarred and in need of repair. b- Throughout the facility, the doors on the main corridors are scarred and in need of painting. c- The carpet in the main corridors and open Living areas are stained throughout the facility. d- Most of the HVAC supply and return grilles throughout the facility are badly rusted. e- The ceiling outside the Women ' s bath has been patched but a finish coat has not been applied. f- There is water damage around many of the HVAC ceiling supply/ return grilles, including but not limited to the Dining Room, Living Room, and corridors. g- The ceiling above the shower in</p>	C 164		

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C 164	Continued From page 3  Resident Room 40 has been patched but no finish coat applied. h- In the bathroom of Resident Room 35, the wall and floor around the commode is badly stained from urine. i- The plastic laminate on the counter top at the Nurse ' s Station is cracked and chipped. j- The handrails throughout the facility are chipped and the paint is peeling off. k- The ceiling across from the nurse ' s Station, the ceiling is badly cracked and the crack extends to a portion of the wall. l- The wall-covering border is peeling in the Small Dining Room. m- The exhaust fan grilles and radiation dampers throughout the facility are covered in dust and lint which may hinder the operation of the dampers in an emergency. n- In Resident Room 40, there is a strong odor of urine.	C 164		
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 observations, the facility has failed to maintain the building free of hazards.  Findings include:	C 166		

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C 166	Continued From page 4  a- The grab bar beside the commode in Resident Room 40 is loose and may not support a person ' s full weight.	C 166		
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 observations, the facility failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.  Findings on include:  a- There are unsealed penetrations at the following locations, to include but not limited to: 1- Telephone Room - CATV cables at the ceiling. 2- Telephone Room - telephone conduit at the ceiling. 3- Telephone Room- At the ends of the conduits. 4- Maintenance Office- cable	C 189		

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C 189	<p>Continued From page 5</p> <p>penetrating the wall.</p> <p>2- Based on observations, the facility has failed to maintain the building electrical system safe and operating.</p> <p>Findings include:</p> <p>a- In the Storage Room across from the Therapy Room, there is a missing blank in Electrical Panel B.</p> <p>b- The EXIT sign located near Room 54 does not illuminate on battery.</p> <p>3- Based on observations, the facility has not maintained the plumbing system safe and operating.</p> <p>Findings include:</p> <p>a- The commode in the Men ' s Room is loose at the connection to the floor and there is water present.</p> <p>4- Based on observations, the facility has failed to maintain the HVAC Duct Smoke Detection system in working order. This could allow smoke to go undetected for longer periods of time.</p> <p>Findings include:</p> <p>a- The duct smoke detector sampling tubes are dirty throughout the facility.</p> <p>5- Based on observations, the facility failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p>	C 189		

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C 189	Continued From page 6  Findings on include:  a- The corridor door to the Employee Lounge does not close completely and latch.	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 observations and testing, the facility has failed to maintain the mechanical exhaust systems in working condition. This may affect all persons in the building as it prevents the exhausting of odors and possible bacteria or germs that may cause illness.  Findings include:  a- The exhaust fans are not working in the following locations, to include but not	C 199		

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C 199	Continued From page 7  limited to: 1- Resident Room 40 2- Resident Room 35	C 199		