Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL013042	A. BUILDING: 01 B. WING _____	R 11/02/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE COUNTRY HOME	2908 COUNTRY HOME ROAD CONCORD, NC 28025

(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 second Follow-up Survey by Dennis Harrell on 11-2-2016. Several deficiencies were not corrected. Further action 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; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to meet NC State Building Code at the time of initial Licensing by not having corridor doors that are 1 ¾ inches and of solid core construction. This could affect all residents, staff and visitors if smoke/fire is not contained in room of origin. Findings on 09/08/2015: a. The following corridor doors where 1 3/8 inch thick and of hollow construction. Locations of	{C 101}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Brigitte Johnson — Administrator — 12/20/16

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{C 101}	Continued From page 1 specific examples include but are not limited to: i. Bathroom near Bedroom 18, ii. Bathroom near Bedroom 22, iii. Bathroom near Bedroom 15,	{C 101}	All Doors shall be 1¾" Solidwood Construction Ordering Doors	12/31/16
{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 failed to provide an environment in accordance with this rule, by not maintaining the HVAC/ventilation. This could affect all residents, staff and visitors if in the event of a fire the dampers do not close completely to contain the fire within the room of origin. I. Based on observation, the facility failed to keep furnishings in good repair. Doors need to completely close and latch shut for security and to inhibit the intrusion of insects and pests. A. New finding on 09/08/2015: 1. The front door does not completely close and does not latch.	{C 164}	Front Door Strike plate Adjusted Door latching properly.	11/23/16
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	{C 189}		

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{C 189}	Continued From page 2 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 Building was not maintained in a safe and operating condition, because breaches through the fire-resistance-rated construction invalidated its integrity. This could affect all residents, staff and visitors if smoke/fire is not contained in Room or compartment of origin. Findings on 09/08/2015: c. In the Outside Mech Room, there were no flanges on the ducts penetrating the ceiling assembly. 13. Based on observation the facility failed to keep HVAC equipment in operating condition. Plumbing equipment not maintained in operating conditioned could effect occupants of the facility requiring use of the equipment. New Finding on 09/08/2015: 1. The PTAC units in rooms #11 and #14 were not operational.	{C 189}	Outside Mechanical Rooms Ducting Penetrations sealed With sheetrock and mud.	11/25/16 12/1/16