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 _____	**06/13/2017**

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 a Construction Section Biennial Survey by Suzanna Fay conducted on June 13, 2017. Records indicate this facility was first licensed on December 1, 1964. On or about March 27, 1987 an increase in capacity was approved for 25 residents bringing the total beds to Forty (40) Beds. Based on this information, the facility is required to meet the 1971 Minimum and Desired Standards and Regulations for the Licensing of Homes for the Aged and Infirm; the 1987 Minimum Standards and Regulations for Homes for the Aged and Disabled; the applicable portions of the 2005 Licensing of Adult Care Homes of Seven or More Beds; the 1958 North Carolina State Building Code, Institutional Occupancy and the 1978 North Carolina State Building Code, Institutional Occupancy.	C 000		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside premises were not maintained in a clean and safe condition. Findings on June 13, 2017: a. The back yard between the kitchen and staff office was littered with dog feces and the area had a strong unpleasant odor.	C 160		

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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. Observations revealed that the ceilings were not maintained in good repair. Findings on June 13, 2017: a. The corridor ceiling outside of the Maintenance Office was heavily damaged. b. The ceiling around the exhaust fan in the janitor's closet of the newer wing was discolored and the finish was flaking off. 2. Observations revealed that the furniture was not maintained in good repair. Findings on June 13, 2017: a. Room 21 - the nightstand being used as a TV table did not have drawers. One of the drawers was observed on the floor by the wall. 3. Observations revealed that the floors were not maintained clean and in good repair. Findings on June 13, 2017: a. Phone/Locker Room - there was a black sticky substance all over the floor around the table as well as on the table. The tile was stained and dirty.	C 164		

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C 164	Continued From page 2 b. Bath by 18 - the tiles around the toilet were heavily stained. The rubber base was detaching from the wall around the toilet. 4. Observations revealed that the facility was not kept clean and free of pests. Findings on June 13, 2017: a. Room 17 - black fecal matter was found on the wallcovering below the chairail around the perimeter of the room. Interview with Staff revealed that they had treated for bedbugs in March. 5. Observations revealed that the facility failed to maintain the walls to be clean and in good repair. Findings on June 13, 2017: a. Laundry Room - the wall by the exterior exit had black mold spots along the inside corner from the countertop to the ceiling. The paint was flaking and peeling to the left of the mold spots.	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. Observations revealed that the facility was not maintained free of hazards.	C 166		

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C 166	Continued From page 3 Findings on June 13, 2017: a. Room 17 - a section of the shelving in the right hand closet was not secure and appeared to be about to fall. b. Room 17 - the towel bar had been removed or broken off in the left hand closet door leaving the brackets exposed. The brackets have sharp metal edges that can cause injury.	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 observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors that open to corridors are required to close completely and latch in the event of a fire. The occupants in the smoke compartment could be effected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on June 13, 2017: a. Room 21 - the door does not stay closed and latched. b. Room 10 - the door does not latch tightly leaving a 3/8" gap around the door.	C 189		

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C 189	Continued From page 4 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Fire resistant rated cross corridor doors are required to close completely and latch in the event of a fire. The occupants in the smoke compartment could be effected if the doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on June 13, 2107: a. The kitchen doors did not latch and close completely when the fire alarm was activated. b. The right hand door at the cross corridor doors separating the wings did not latch and close completely. The door was difficult to open when resetting. 3. Based on observation the facility failed to maintain all fire safety equipment in a safe and operating condition. Findings on June 13, 2017: a. The exit light at the exit by Room 19 did not switch to battery backup when tested. b. The door magnets for the cross corridor doors and kitchen doors reset when the fire alarm was silenced. c. Review of the Fire Alarm System inspection report conducted on March 13, 2017 revealed that the pull stations failed to operate. 4. Based on observation, the mechanical equipment was not maintained in operating condition. Findings on June 13, 2017: a. Room 21 - the air supply vent was not secure to the ceiling. b. Laundry Room - there was a large amount of	C 189		

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C 189	Continued From page 5 lint accumulating on the dryer exhaust duct, the ceiling above the duct, the walls around the duct and the adjacent light fixture. c. Bath by Room 22 - the exhaust fan had an accumulation of dust and was not secure to the ceiling. 5. Observations revealed that the electrical lighting was not maintained in operating condition. Findings on June 13, 2017: a. The light in the Beauty Shop was not working. 6. Based on observation, the doors were not maintained in operating condition. Findings on June 13, 2017: a. The latch plate on the door to the smoking porch was heavily damaged and the door did not close tightly. b. Room 22 - the latch on the door was broken. c. Bath by Room 22 - the door was sticking making it difficult to open and close. d. Staff office across from the smoking porch - the glass for the sliding door is missing and has been infilled with a sheet of plywood. e. Room 8 - the strike plate was missing from the door. 7. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Doors with holes through the width of the door may not contain the spread of smoke or fire to the area of origin. Findings on June 13, 2017: a. Room 15 - there is a hole in the door at the door knob. b. Room 11 - there is a hole in the door at the door knob.	C 189		

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C 189	Continued From page 6 8. Observations revealed that the building was not maintained in a safe and operating condition. Findings on June 13, 2017: a. The exterior window to the left of the living room was broken and the cracks had been taped over with duct tape. b. The porch attachment at the exit by Room 19 was dipping heavily to the right and the support post was tilted at an angle. Failure to secure the porch could result in injury to the residents, staff and visitors.	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. Observations revealed that the exhaust ventilation system was not operating at the rate of two cubic feet per minute per square foot.	C 199		

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C 199	Continued From page 7 Findings on June 13, 2017: a. Laundry Room - the exhaust fan was not working. b. Geriatric Bath - the exhaust fan was not working. c. Janitor Closet - the exhaust fan was not working. d. Guest bath - the exhaust fan was not working.	C 199		