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
	HAL096049	A. BUILDING: 01 B. WING _____	03/22/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COUNTRYSIDE VILLAGE	5383 US 117 NORTH PIKEVILLE, NC 27863

(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 Biennial Construction Survey by Billy S. Bryant and Ed Miller conducted on 03/22/2017. Records indicate this facility was first licensed on 05/16/1997. The facility is currently licensed for 40 Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1995 (1997 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure.	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 did not meet the building code requirmemst for special locking.	C 101		

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C 101	Continued From page 1 This could effect occupnats of the facility by delaying or preventing evacuation in the event of an emergency. Finding on 03/22/2017: a. Entrance to Staff Area - The magnetically locked door adjacent to the Beauty Salon to the service corridor does not have a maual override switch on the service corridor side of the door.	C 101	Manual override switch installed.	4/19/17
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 has not maintained walls in good repair. Finding on 03/22/2017: a. Bathroom/Shower Across from HCC's Office - The top of the half wall for the shower has some broken, cracked and missing pieces of ceramic tile leaving sharp edges.	C 164	Missing tile pieces replaced.	4/19/17
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall:	C 166		

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C 166	Continued From page 2 (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 observation the facility is not maintained free from hazards. The building code designated required clearance of 36" for electrical equipment must not be encroached upon. Obstructing access to electrical equipment could delay timely operation in an emergency situation. Finding on 03/22/2017: a. Access to the electrical panels is obstructed by items stored in front of the panels.	C 166	Reorganized electrical equipment appliances with no obstruction in front of the panels.	4/18/17
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	C 189		

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C 189	Continued From page 3 not completely close and latch to help limit the spread of smoke or fire to the area of origin. Findings on 02/22/2017: a. Kitchen - The door from the kitchen into the dining room does not have latching type hardware. The door has a barrel bolt type lock on the kitchen side that will keep the door from closing if the bolt is in the down position. b. Beauty Shop - The door from the room to the corridor hits the door frame preventing it from completely closing and latching. c. Laundry/Soiled Linen - The door from the laundry area that opens into the service corridor has had the automatic closer removed. d. Room 102 - The door contacts the frame and will not close. The door is damaged - the hinge side rail is splitting open, the door face laminate is detaching and the hinge is damaged and loose. e. Room 104 - The door to the corridor will not latch to remain closed when shut. f. Room 105 - The door to the corridor will not latch to remain closed when shut due to the loose strike plate. 2. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Finding on 03/22/2017: a. Main Electrical Room - There is a gap in the	C 189	Installed lock handle and removed barrel bolt lock. Adjusted and tightened hinges-door no longer hits door frame. Automatic Closer reinstalled. Repaired hinge to door so there is no contact with frame. Repaired door face laminate. Repaired strike plate Tightened strike plate	4/12/17 4/6/17 4/3/17 4/19/17 4/6/17 4/6/17

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C 189	Continued From page 4 the fire resistant rated ceiling where it is penetrated by a bundle of data cables. 3. Based on observation there is a failure to install and maintain plumbing piping in a safe configuration. Failure to maintain or install plumbing piping in a safe condition could effect all occupants of the facility if the domestic water supply became contaminated. Finding on 03/22/2017: a. Kitchen - The ends of the ice maker drain piping are resting on the floor drain grate and so they do not have the code required 2" minimum gap between the ends of the pipes and the drain grate.	C 189	Insulated cables with red fire caulk. Replaced ice machine and drain lines are in compliance.	4/17/17 4/13/17

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C 189	Continued From page 5 Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin.	C 189		