

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL041082	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 06/07/2018
NAME OF PROVIDER OR SUPPLIER ALPHA CONCORD OF GREENSBORO		STREET ADDRESS, CITY, STATE, ZIP CODE 3301 GAR PLACE GREENSBORO, NC 27406		
(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 Construction Section Follow-up Survey report by Frank Strickland on 06/07/2018: Some of the previous cited deficiencies have been corrected. However, there still outstanding deficiencies that require correction action and a new Plan of Correction 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, this facility does not meet licensure and code requirements in effect at the time of construction. Findings on 06/07/2018: The Laundry Room corridor entry door is a one hour fire-rated door and the closure has been removed and the door was wedged in the open	C 101		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 position.	C 101		
{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 mechanical systems are not kept clean and in good repair. Findings on 06/07/2018: (a) Corridor near Bedroom 107 - the HVAC return grille with its radiation damper has an excessive accumulation of dust/lint. (b) Dining Housekeeping Closet - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint. (c) Salon - the ventilation grille with its radiation damper has an excessive accumulation of dust/lint. 2-Based on Observation, this facility has failed to keep ceilings, floors or floor coverings clean and in good repair. Findings on 06/07/ 2018: (a) Most Bedrooms - the vinyl floors at the corridor doors are dirty and stained.	{C 164}		