

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL086001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 02/06/2024
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

CENTRAL CARE

**139 APEX LANE
MOUNT AIRY, NC 27030**

(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 Follow Up Construction Survey by Suzanna Fay conducted on February 6, 2024. A follow up to the Complaint Survey was conducted at the same time and those deficiencies are recorded in a separate report. There are deficiencies from the Biennial Construction Survey that remain to be corrected.	{C 000}		
{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 facility walls, ceilings and floors were not kept clean and in good repair. Findings on February 6, 2024: Deficiencies remaining from Complaint: h. Room A10 - There are gray stains on the vinyl tile in the middle of the room which appear to be permanent. There are small brown stains on the light fixture and on the ceiling around the light fixture. At the follow up survey, the room was locked and staff did not have a key. Interview with staff revealed that the floor and ceiling had not been cleaned.	{C 164}	Due to the room A10 being locked, the floor has not been repaired at this time. Floor will be completed by 4/22/24.	4/22/24

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

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER CENTRAL CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 139 APEX LANE MOUNT AIRY, NC 27030		
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{C 164}	Continued From page 1 3. Observations revealed that the furnishings were not clean and in good repair. Findings on February 6, 2024: a. Room A-9 - two of the window blind slats have broken off. Interview with staff revealed that the blinds had been repaired but the resident had pulled them off again.	{C 164}		
{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: 2. Observations revealed that the mechanical equipment was not maintained in a safe and operating manner. Exposed heating elements on baseboard radiators can cause an injury or fire if not protected. Findings on February 6, 2024: Deficiencies remaining from Complaint: b. Room A10 - the protective cover for the baseboard radiator has fallen off. Interview with staff revealed that this is taking longer as it has to be custom made. 4. Observations revealed that the plumbing equipment was not maintained in a safe and	{C 189}	Administrator has contacted two different fabricators pertaining to the heat register cover in A10. Both were unable to duplicate the heat register covers. Still in the process of finding someone to build the register covers. Room will remain locked until repaired.	4/24/24

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{C 189}	Continued From page 2 operating manner. Water Closets securely mounted to maintain seal prevent water leaks and sewer gas from entering the facility. Findings on February 6, 2024: a. Half Bath by Room A12 - the toilet is not secure to the floor. 6. Based on observation there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on February 6, 2024: b. Room A9 - the ceiling joint in the closet is not sealed.	{C 189}	Toilet was repaired on 4/22/24	4/22/24