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
	HAL041082	A. BUILDING: 01 B. WING _____	11/21/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALPHA CONCORD OF GREENSBORO	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 Report of a Construction Section Biennial Survey by Ed Miller, conducted on November 21, 2024. Records indicate this facility was Licensed on January 10, 1990, as a Home for the Aged. The facility is currently licensed for 64 Beds. Therefore, the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, and applicable portions of the 1978 (Revision 10) Edition, of the North Carolina Building Code(s), Institutional Occupancy Unrestrained, and the 1987 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure. Deficiencies were cited requiring a Plan of Correction.	C 000		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Based on observation, doorways were not free of obstruction. This would affect all residents, staff, and visitors by slowing or obstructing egress during an emergency. Findings on November 21, 2024: a. 100 Hall, Living Room - the exterior exit door was blocked from opening 90 degrees with 3 flowerpots and a watering can, positioned behind the door.	C 150	Removal of the flowerpots and watering can were removed from behind the door.	11/21/2024

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Hydi Ranew TITLE Administrator (X6) DATE 12/27/24

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C 160	Continued From page 1	C 160		
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. Based on observation, the outside grounds were not maintained in a clean and safe condition. Findings on November 21, 2024: a. 200 Hall, Chapel Porch - the exit discharge from the porch was through a worn gulley about five inches deep. In addition, a splash block was located within the gulley, partially covered with leaves.	C 160	The facility cleaned the gulley and covered the hole with sand and rocks. The facility will maintain a monthly inspection of this area. Removal of the Splash Block was removed on the day of visit.	11/29/2024 11/21/24
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 ceilings were not kept clean and in good repair.	C 164		

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C 164	Continued From page 2 Findings on November 21, 2024: a. 300 Hall, Kitchen - the ceiling was dirty above the dish sink.	C 164	The ceiling above the Dish Sink was cleaned and staff were in-services to daily to wipe down any food splashed on walls.	11/22/2024
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. Based on observation, the Building Plumbing fixtures are not free of all hazards. Findings on November 21, 2024: a. 300 Hall, Beauty Salon - the shampoo sink was not completely secured to the wall.	C 166	The Beauty Salon Sink was re-attached to the wall for secured placement.	12/27/24
	2. Based on Observation, the Building was not maintained free of hazards because the compressed gas cylinders were not properly secured. They may fall and break their valves off. This would turn the compressed gas cylinder into a dangerous projectile. Findings on November 21, 2024: a. 400 Hall, Bedroom 404 - six portable oxygen cylinders were standing up on the floor in a shallow plastic beverage crate not properly secured. b. 400 Hall, Utility Room - one portable medical oxygen cylinder with a regulator that extended beyond its collar guard and one portable medical oxygen cylinder with a regulator were standing up		A-The vendor that supplies the Oxygen was called and a metal crate was delivered to the facility for properly secured placement. B-The removal of the portable oxygen tanks was picked up for delivered and removed from the utility room.	11/26/2024 11/26/24

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C 166	Continued From page 3 on the floor not properly secured.	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 observations, the building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in the room of origin. Findings on November 21, 2024: a. 300 Hall, Laundry behind the small Dryer - there was a flexible conduit not sealed as it penetrated the fire-resistance-rated wall assembly. b. 300 Hall, Kitchen Pantry - there were gaps around the commercial kitchen hood's fire suppression system's flexible conduits that penetrated through the fire-resistance-rated ceiling assembly. 2. Based on observation, the smoke tight corridor doors are not maintained in a safe and operating condition. Findings on November 21, 2024: a. 300 Hall, Laundry - there were eight, 1/4-inch diameter holes through the corridor door where several door closers were removed.	C 189	A- Laundry- The hole behind the dryer was covered with fire resistant caulk. B-The gaps in the kitchen Pantry was covered with fire resistant caulk. The eight holes were covered on the corridor door.	11/27/2024 11/27/2024 12/04/24

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C 189	Continued From page 4 4. Based on observation, the building was not maintained in a safe and operating condition, because the electrical lighting system was not being operated or maintained safely, providing reliable illumination. Findings on November 21, 2024: a. Front Entrance - the exterior light fixture was missing its globe. b. 100 Hall, Bedroom 108 Bathroom - the over-the-sink light fixture was missing its globe. Facility Staff corrected this deficiency before the Construction Surveyor left the site. 5. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This would affect all if a fire were not contained in the room or compartment of origin. Findings on November 21, 2024: a. 100 Hall, Bedroom 108 Bathroom - a fire sprinkler escutcheon plate had fallen, exposing an opening through the fire-resistance-rated ceiling. b. 100 Hall, Bedroom 108 - a fire sprinkler escutcheon plate had fallen, exposing an opening through the fire-resistance-rated ceiling. c. 100 Hall, Bedroom 108 Hall-side Closet- a fire sprinkler escutcheon plate did not cover the complete opening through the fire-resistance-rated ceiling. d. 200 Hall, Corridor near Bedroom 212 - a fire sprinkler was missing its escutcheon plate exposing an opening through the fire-resistance-rated ceiling. e. 400 Hall, Office Closet - the fire sprinkler escutcheon plate did not cover the complete opening through the fire-resistance-rated ceiling. 6. Based on Observation, the corridor doors	C 189	A- The light fixtures to the front entrance of the facility Globe was replaced to maintained safety. A- .108 Escutcheon plates were secured, and no opening exists B- 108 Escutcheon plates were secured, and no opening exists C-108 Escutcheon plates were secured, and no opening exists D- 212- A new Escutcheon plate was installed to cover the opening outside room door. E-108 Escutcheon plates were secured, and no opening exists	11/22/2024 11/27/2024 11/27/24 11/27/24 12/16/24 11/27/24

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C 189	Continued From page 5 were not maintained in a safe and operating condition. Doors were blocked open or held open by unapproved devices or methods. All occupants in the facility could be affected if doors cannot be closed or closed rapidly with a light push or pull of the door to limit the spread of smoke and fire to the area of origin. Findings on November 21, 2024: a. 200 Hall, RCC Office - a brick was holding the corridor door open. 7. Based on Observation, and interview with Manager, the facility plumbing system was not maintained in a safe and operating condition. Findings on November 21, 2024: a. 300 Hall, Kitchen - the ice machine's drain's outlet was only ½-inch above the floor drain, less than the minimum 2-inches of vertical clearance needed.	C 189	The removal of the brick was completed on day of inspection. In-services with RCC to not have door propped open. The new ice machine drain outlet is above the floor drain with a secured device plate.	11/21/24 11/29/24
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.	C 199		

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C 199	Continued From page 6 This Rule is not met as evidenced by: 1. Based on observation and testing with a thin plastic sheet, the facility did not provide working ventilation in spaces needed to have ventilation. Findings on November 21, 2024: a. 100 Hall, Utility Room near Bedroom 101 - the exhaust ventilation system was not removing air. b. 300 Hall, Dining Room Utility Closet - the exhaust ventilation system was not removing air. c. 300 Hall, Bedroom 303 Bathroom - the exhaust ventilation system was not removing air. d. 400 Hall, Men Restroom - the exhaust ventilation system was not removing air.	C 199	To ensure proper functioning, the electrical switch for the facility exhaust ventilation system, situated in the beauty room was re-wired. A-C	12/27/24