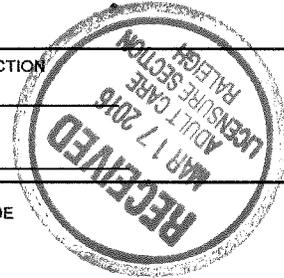


Division of Health Service Regulation



STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL057007</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>02/04/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HOT SPRINGS FAMILY CARE HOME #1</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>311 #1 NORTH SURPINTINE ROAD HOT SPRINGS, NC 28743</b>
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(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  The Adult Care Licensure Section and the Madison County Department of Social Services conducted an annual and follow-up survey on February 04, 2016.	C 000		
C 034	<p>10A NCAC 13G .0302(n) Design and Construction</p> <p>10A NCAC 13G .0302 Design and Construction (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record review, the facility failed to have a current sanitation inspection by the North Carolina Division of Environmental Health.</p> <p>The findings are:</p> <p>Review of facility files on 02/04/16 revealed no current sanitation inspection report available from the Department of Natural Resources Division of Environmental Health.</p> <p>Interview with the Social Worker on 02/04/16 at 12:30pm revealed: -The last sanitation inspection by the local County had been done in July of 2014. -She did not have a copy of the last inspection in the home. -She became aware all her facilities were late in December of 2015 (during an annual inspection of another one of her homes). She had called local County Health Department in January 2016 to request someone come out to do the annual</p>	C 034	<p><b>C034</b> Facility Social Worker has contacted sanitation and asked them to come out to inspect facility, Adult Home Specialist has also contacted Sanitation office and asked them to come out. Once we receive inspection facility Social Worker will ensure the inspection report is maintained in facility.</p>	

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Wesley McClark TITLE: Social Worker (X6) DATE: 3/11/16

Reviewed and accepted 03/30/16 by Rita Wilson, RN, BSN

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL057007</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/04/2016</b>
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C 034	Continued From page 1  inspections for all her homes but no one had come out.  Review of documentation presented by the Social Worker revealed on 01/06/16 and again on 01/21/16 she had made telephone calls to the local Health Department and explained the facility was overdue for their annual inspection and requested to have someone come out to conduct an inspection.	C 034		
C 074	10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings  10A NCAC 13G .0315 Housekeeping And Furnishings (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes.  This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to have tile floors clean and in good repair in 2 of 2 resident bathrooms.  The findings are:  Observations during initial tour of the facility on 02/04/16 at 9:30am revealed: -Two common bathrooms in the home. -The tiled floor at the base of both toilets were discolored/stained with heavy dark brown ring around the floor.  Interview with the Supervisor in Charge on 02/04/16 at 10:00am revealed: -The floors were swept and mopped every	C 074	C074 Discolored/stained Tiles around toilets will be replaced. March 31, 2016	3/31/16

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER  <b>HOT SPRINGS FAMILY CARE HOME #1</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>311 #1 NORTH SURPINTINE ROAD HOT SPRINGS, NC 28743</b>
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C 074	<p>Continued From page 2</p> <p>Monday, Wednesday and Friday.</p> <ul style="list-style-type: none"> <li>-The tiled floors around the toilets were stained and would not come clean.</li> <li>-The floors had been discolored/stained when she came to work at the facility in October of 2015.</li> </ul> <p>Review of facility files on 02/04/16 revealed no current sanitation inspection report available from the Department of Natural Resources Division of Environmental Health.</p> <p>Interviews with 3 alert and oriented residents revealed:</p> <ul style="list-style-type: none"> <li>-The floors were swept and mopped every Monday, Wednesday and Friday.</li> <li>-None of the residents had concerns and believed the facility was kept clean and odor free.</li> </ul>	C 074		2/21/16
C 256	<p>10A NCAC 13G .0904(a)(1) Nutrition and Food Service</p> <p>10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (1) The kitchen, dining and food storage areas shall be clean, orderly and protected from contamination.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews the facility failed to maintain a clean oven and kitchen cabinets.</p> <p>The findings are:</p> <ul style="list-style-type: none"> <li>-Observations of the kitchen area on 02/04/16 at 9:40am revealed:</li> </ul>	C 256	<p>C256</p> <ul style="list-style-type: none"> <li>-Cabinet doors have been cleaned.</li> <li>-Oven has been cleaned</li> </ul>	

Division of Health Service Regulation

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C 256	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-21 cabinets doors.</li> <li>-The base of each door had a build-up of a thick, dark, sticky substance.</li> <li>-The interior oven and door had a heavy build-up of dark burned on debris.</li> </ul> <p>Interview with the Supervisor in Charge on 02/04/16 at 9:45am revealed:</p> <ul style="list-style-type: none"> <li>-She had worked at the facility since October of 2015.</li> <li>-She did not have a cleaning schedule for the kitchen appliances or the cabinets.</li> <li>-She did not know when the cabinets or oven had last been cleaned.</li> </ul> <p>Review of facility files on 02/04/16 revealed no current sanitation inspection report available from the Department of Natural Resources Division of Environmental Health.</p>	C 256	<p>The facility will focus on the importance of cleanliness during QI meetings</p> <p>Facility Social Workers will observe bi-weekly to ensure cleanliness.</p>	on-going