

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL011032</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/03/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MOUNTAIN VALLEY RETIREMENT HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>630 DILLINGHAM ROAD BARNARDSVILLE, NC 28709</b>
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C 000	Initial Comments  The Adult Care Licensure Section and the Buncombe County Department of Social Services completed a Annual survey on 6/1/16, 6/2/16 and 6/3/16.	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 record review and interviews, the facility failed to maintain on the premises the most current fire and environmental health inspection reports.</p> <p>The findings are:</p> <p>Interview on 6/1/16 at 9:35AM with the Supervisor-in-Charge (SIC) worked to provide copies of the most recent fire and environmental health inspection reports for review at a later time during the survey.</p> <p>Interview on 6/1/16 at 1:50 pm with the SIC revealed: -He was unable to find the most current environmental health report or fire inspection. -It had been a while since the environmental health inspection had been done. -He did not readily know the last time the facility was inspected. -The Administrator was at home looking for the</p>	C 034		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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C 034	<p>Continued From page 1</p> <p>latest Fire and Building Safety Inspection Report and Health Sanitation report documents as he did not have it there at the facility.</p> <p>On 6/2/16 at 9:05 am the Administrator presented revealed: -"An Inspection by the NC Department of Environmental and Natural Resources, Division of Environmental Health conducted on 10/26/15. - She did not have a copy of the last Fire and Safety Report.</p> <p>Interview on 6/2/16/at 11:05am with the Fire Inspector revealed: -He expected facilities to call his office when they were due for an inspection, but his office also had a way to track facilities for inspections. -Upon completion of his inspection on 6/2/16 he provided a report available for review.</p> <p>Review of Fire and Building Safety Inspection Report dated 6/2/16 revealed : - "the building is conditionally approved for licensing." "hazards found were exit signs at the end of both halls needed to be replaced and in working order and correct evacuation plan.</p>	C 034		
C 098	<p>10A NCAC 13G .0316 (c) Fire Safety And Disaster Plan</p> <p>10A NCAC 13G .0316 Fire Safety And Disaster Plan</p> <p>(c) Any fire safety requirements required by city ordinances or county building inspectors shall be met.</p>	C 098		

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C 098	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to maintain fire safety requirements required by city ordinances or county building inspectors.</p> <p>The findings are:</p> <p>Interview with the Supervisor-in-Charge (SIC) on 06/01/16 at 1:50pm. revealed: -He could not find a fire inspection. -The Administrator was responsible for keeping up with the fire inspection.</p> <p>Telephone interview with the fire safety Office Manager on 06/01/16 at 2:15pm p.m. revealed: -The last fire inspection at the facility was in 2014. -The fire inspection should be done annually. -The facility had not requested a fire inspection. -The facility had not paid for a fire inspection to be done.</p> <p>Telephone interview with the Administrator on 06/02/15 at 10:25am revealed: -She was aware the fire safety permit had expired. -She was not sure who was responsible for keeping track of the facility's annual fire inspection. -It was her assumption the county sent the fire inspector to the facility, prior to the expiration date of the fire safety permit. -She did not know she had to pay for a fire inspection. -There was no monitoring plan in place to track the annual fire inspection.</p>	C 098		

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C 102  C 102	<p>Continued From page 3</p> <p>10A NCAC 13G .0317 (a) Building Service Equipment</p> <p>10A NCAC 13G .0317 Building Service Equipment</p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition</p> <p>This Rule is not met as evidenced by: TYPE A2 VIOLATION</p> <p>Based on observations, record reviews and interviews, the facility failed to assure hot water temperatures for 5 of 5 assisted living residents' bathroom areas and 1of 1 main shower and bath room area were maintained between 100 degrees Fahrenheit (F) and 116 degrees F.</p> <p>The findings are:</p> <p>Review of the current facility license revealed the facility was licensed for 6 beds.</p> <p>Review of the facility's current Resident Room Roster revealed the current census was 5.</p> <p>Observations made in the main bathroom where the shower and tub and resident rooms were located on 06/01/16 at 9:50am revealed: -At 9:50am, the hot water temperature at the bathroom sink faucet was 144 degrees F with noticable steam and no warning signs posted for residents. -At 9:53am the hot water temperature at the bathroom tub faucet was 150 degrees F with</p>	C 102  C 102		

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C 102	<p>Continued From page 4</p> <p>noticable steam and no warning signs posted for residents.</p> <p>-At 9:56am the hot water temperature at the bathroom shower faucet was 140 degrees F with noticable steam and no warning signs for the residents.</p> <p>-At 10:05am the hot water temperature in the shared bathroom between rooms 4-6 was 152 degrees F with notable steam and no warning signs.</p> <p>-At 10:08am the hot water temperature was measured in the bathroom number 3 was 150 degrees F with noticable steam and no warning signs for the residents.</p> <p>Interview on 06/01/16 at 1:40pm with the SIC (Supervisor in Charge) revealed:</p> <p>-He and the Administrator had noticed the water was too hot, and they always adjusted the water temperature by turning the knob on the hot water heater to a lower setting when assisting residents with showers.</p> <p>-All the residents in the facility were able to adjust the showers independently.</p> <p>- He would turn the water heater up or down based on what residents told him about the water being too hot or cold.</p> <p>- The facility did not have a thermometer to measure the water temperatures.</p> <p>Interview on 06/01/16 at 10:27am with Resident #1 revealed:</p> <p>-She had already had her shower this am.</p> <p>-She had to turn the water back as the hot water was "scalding".</p> <p>-At 4:29pm the shared bathroom between rooms #5 and #6 was measured 130 degrees F.</p> <p>-At 4:31pm, the hot water temperature in the bathroom sink faucet was 130 degrees F.</p>	C 102		

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C 102	<p>Continued From page 5</p> <p>-At 4:33pm the hot water temperature was measured in the bathroom tub faucet at 130 degrees F.</p> <p>Additional checks of water temperatures on 06/02/16 between 9:00am and 9:47am revealed the following:</p> <p>-At 9:00am the hot water temperature was measured in the main shared bathroom tub faucet at 142 degrees F.</p> <p>-At 9:03am the hot water temperature was measured in the main shared bathroom shower faucet at 142 degrees F.</p> <p>-In room #4 at 9:06am the bathroom sink hot water temperature was 142 degrees F with notable steam.</p> <p>-In room #5 at 9:10am the sink hot water temperature was 150 degrees F with notable steam.</p> <p>Interview on 06/02/16 at 10:40am with the plumber hired by the facility revealed:</p> <ul style="list-style-type: none"> <li>- The valve that mixes hot water was not there and that was why the water was so very hot.</li> <li>- He was not sure if it was ever put on but he could not say for sure.</li> <li>-There were some newer pipes under the house that was not there with the original piping.</li> <li>- He had adjusted the water temperature after replacing the valves that mix the hot water.</li> </ul> <p>Interview on 06/02/16 at 10:45am with the Administrator revealed:</p> <ul style="list-style-type: none"> <li>-There was no water temperature log kept.</li> <li>- The facility did not have a thermometer to measure the water temperatures at the facility.</li> <li>- She was aware there were problems with the hot water when they took over management in February 2016 but she did not know anything about gas heat or how to fix it.</li> </ul>	C 102		

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C 102	<p>Continued From page 6</p> <p>-The SIC was responsible for turning the temperature up or down depending on what the residents' concerns were at the time.</p> <p>Observations made on the main bathroom where the shower and tub were located on 06/03/16 at 9:00am revealed:</p> <p>-At 9:00am, the hot water temperature at the bathroom sink faucet was 110 degrees F.</p> <p>-At 9:03am the hot water temperature at the bathroom tub faucet was 110 degrees F.</p> <p>-At 9:07am the hot water temperature at the bathroom shower faucet was 110 degrees F.</p> <p>-At 9:15am the hot water temperature at the shared bathroom between room's #4a and #4b was 110 degrees F.</p> <p>-At 9:18am the hot water temperature at the bathroom number #2 and #3 was 110 degrees F.</p> <p>At 9:23am the hot water temperature at the bathroom number #5 and #6 was 110 degrees F.</p> <hr/> <p>The facility provided a Plan of Protection as follows:</p> <ul style="list-style-type: none"> <li>- Informing the resident not to use the hot water.</li> <li>- Placing signs up on the bathrooms not to use the hot water.</li> <li>- The Administrator will call someone to come out, look at and instruct her on how to operate her hot water system.</li> <li>- Will make sure she has the knowledge on correct use of hot water heater.</li> <li>-Will get a thermometer to measure hot water temperatures.</li> <li>- Will do daily checks and keep a log to maintain the right temperature for the safety of the residents.</li> <li>- For two weeks will do weekly checks, add to monthly checks and on the facility checklist.</li> </ul>	C 102		

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C 271	Continued From page 7	C 271		
C 271	<p>10A NCAC 13G .0904(d)(1) Nutrition and Food Service</p> <p>10A NCAC 13G .0904 Nutrition And Food Service (d) Food Requirements in Family Care Homes: (1) Each resident shall be served a minimum of three nutritionally adequate, palatable meals a day at regular hours with at least 10 hours between the breakfast and evening meals.</p> <p>This Rule is not met as evidenced by: Based on observation, interviews and record reviews the facility failed to assure a minimum of three nutritionally adequate, palatable meals a day at regular hours with at least 10 hours between the breakfast and evening meals for 5 of 6 residents residing in the facility (Resident #1, Resident #2, Resident #3, Resident #4, Resident #5).</p> <p>The findings are:</p> <p>The current census at the facility was 6 residents on 5/20/16 and there were two residents present in the facility on the AHS visit.</p> <p>Review of Resident #1 current FL2 dated 2/20/16 4:45pm revealed: - Diagnosis of epilepsy, depression, COPD (Chronic obstructive pulmonary disease), other convulsions, tobacco use. - A physicians order for a regular diet.</p> <p>Review of Resident #2 current FL2 dated 2/18/16 revealed: - Diagnosis is hyperthyroidism, HTN (Hypertension), bilateral venous stasis, bilateral peripheral edema, morbid obesity, PTSD (Post traumatic stress disorder), schizoaffective</p>	C 271		

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C 271	<p>Continued From page 8</p> <p>disorder, - A physician order for a regular diet.</p> <p>Review of Resident #3 current FL2 dated 3/18/16 revealed: - Diagnosis is nausea vomiting, abdominal pain; panic attack; HTN; mood disorder; schizophrenia - No diet order listed on FL2.</p> <p>Review of Resident #4 current FL2 dated 3/3/16 revealed: - Diagnosis is Diabetes Type II; asthma; peptic ulcers; cholesterol; GERD (Gastroesophageal reflux disease); seasonal allergies; history of post-traumatic stress disorder (PTSD); major depressive disorder recurrent severe with psychotic features. - A physician order of no concentrated sweets (NCS).</p> <p>Review of Resident #5 current FL2 dated 5/3/16 revealed: - Diagnosis is hypertension (HTN); AODM (Adult-Onset Diabetes Mellitus); GERD; hyperlipidemia; sleep apnea; depression. - A physician order of NCS.</p> <p>Review of Week 3, Friday, regular breakfast menu on 5/20/16 at 4:15pm revealed: -6 ounces juice with Vitamin C, ¾ cup dry cereal -1 bran muffin -egg (choice) -1 Tablespoon margarine/jelly -8ounces milk 2%.</p> <p>Observation of food supply on 5/20/16 at 4:20pm revealed: - One quarter of half gallon of orange juice in the refrigerator. - One quart of fruit flavored drink in the</p>	C 271		

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C 271	<p>Continued From page 9</p> <p>refrigerator.</p> <ul style="list-style-type: none"> <li>- No milk in the refrigerator.</li> <li>- Three dozen eggs in the refrigerator.</li> <li>- One bag of lettuce in the refrigerator drawer.</li> <li>- One piece leftover pizza in the refrigerator.</li> <li>- One half container of butter in the refrigerator.</li> <li>- Six miscellaneous containers of condiments in the refrigerator.</li> <li>- One package of frozen chicken in the kitchen freezer.</li> <li>- Three containers of ice cream in the kitchen freezer.</li> <li>- One open frozen dinner in the kitchen freezer.</li> <li>- One cabinet in the pantry filled with sugar free snacks.</li> <li>- One half loaf of bread in the pantry.</li> <li>- One dozen cans goods within expiration date in the pantry.</li> <li>- Eight miscellaneous packages of dry goods in the pantry.</li> <li>- One package of frozen fish in the storage freezer.</li> <li>- One package of popsicles in the storage freezer.</li> <li>- One package of frozen meat in the storage freezer.</li> </ul> <p>Interview with Resident #1 on 5/20/16 at 3:45pm revealed:</p> <ul style="list-style-type: none"> <li>- Nothing wrong with the food.</li> <li>- Another resident would not eat because he was mad at his family member.</li> <li>- " We get snacks 3 times a day. "</li> </ul> <p>Interview with Resident #2 on 5/20/16 at 4:00pm revealed:</p> <ul style="list-style-type: none"> <li>- " I bought my own snacks for when I get hungry at night. "</li> <li>- " We had oatmeal pies for the morning snack with coffee and juice. "</li> </ul>	C 271		

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C 271	<p>Continued From page 10</p> <p>Interview with Staff A, Supervisor in charge (SIC), on 5/20/16 at 4:15pm revealed:</p> <ul style="list-style-type: none"> <li>- " We keep the door on the refrigerator locked and I have a key. "</li> <li>- There is no milk in the refrigerator.</li> <li>- " We ran out of milk yesterday. "</li> <li>- Resident #5 brought his own food into the facility two days ago to put in the pantry and I have not checked it yet for expiration dates.</li> <li>- The food that was expired belonged to Resident #5.</li> <li>- " We didn ' t know that we were supposed to give residents seconds at meals if the residents ask for them. "</li> <li>- The Administrator is going to the store today to bring food here.</li> <li>- We serve breakfast at 7:00am and supper at 5:00pm.</li> </ul> <p>Phone Interview with Administrator on 5/20/16 at 4:45pm revealed:</p> <ul style="list-style-type: none"> <li>- " We don ' t use that much milk. "</li> <li>- " We just ran out of milk. "</li> <li>- " I am going to the store today. "</li> <li>- Administrator will send copies of the receipts for foods purchased today and delivered to the facility today.</li> </ul> <p>Record Review on 5/20/16 at 8:30pm revealed electronic copies of two receipts from Administrator, for groceries bought on this date at 8:51pm including milk, flavored drinks, frozen vegetables, chicken, beef, cereal and canned fruit.</p> <p>Adult Home Specialist accompanied DHSR on 6/1/16 annual survey.</p> <p>Review of regular menu for breakfast on 6/1/16 at</p>	C 271		

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C 271	<p>Continued From page 11</p> <p>12:00pm revealed: -6 ounces juice with vitamin C, 2 Pancakes -½ cup Strawberry ' s or Blueberry ' s -2 Tablespoon syrup -8 ounces milk</p> <p>Review of regular menu for lunch on 6/1/16 at 12:00pm revealed: -¾ cup vegetable soup with crackers -Tuna salad sandwich -½ cup coleslaw -½ cup fruit cocktail -8 oz. milk 2%</p> <p>Observation of noon meal on 6/1/16 at 12:00pm revealed: -Turkey and cheese sandwich with lettuce and tomato -Tomato soup - Pears - Lemonade - Milk</p> <p>Observation of food supply on 6/1/16 revealed appropriate and adequate 3-5 day supply of meats, vegetables, breads, fruit, milk and juices for three adequate meals and snacks per day for regular and modified diets which matched menu.</p> <p>Interview with Resident #1 on 6/1/16 at 10:30am revealed: - " I wish we could get more. " - " I didn ' t know we could ask for seconds. " - " We are getting snacks. " - They feed us good. - " I buy my own coffee, they buy it too. "</p> <p>Interview with Resident #2 on 6/1/16 at 9:15am revealed: - People are fussing about the food on the menu.</p>	C 271		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL011032</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/03/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MOUNTAIN VALLEY RETIREMENT HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>630 DILLINGHAM ROAD BARNARDSVILLE, NC 28709</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 271	<p>Continued From page 12</p> <ul style="list-style-type: none"> <li>- " We can ask for seconds. "</li> <li>- Staff offer snacks three times a day.</li> <li>- " If I ' m hungry I ' ll ask for snack and they ' ll give it to me. "</li> </ul> <p>Interview with Resident #3 on 6/1/16 at 10:45am revealed:</p> <ul style="list-style-type: none"> <li>- We get snacks 3 times a day, like raisins, vanilla wafers and popcorn.</li> <li>- This morning for breakfast we had grits, omelet with cheese and onions and apple juice.</li> <li>- " They don ' t give us much bacon and not too often sausage. "</li> <li>- " I ask for seconds and they don ' t usually have enough. "</li> <li>- " I don ' t drink orange juice. "</li> </ul> <p>Interview with Resident #4 on 6/1/16 at 4:45pm revealed:</p> <ul style="list-style-type: none"> <li>- The food is not enough portions.</li> <li>- " They sometimes have seconds and sometimes don ' t. "</li> <li>- " I also buy my own food and snacks. "</li> </ul> <p>Interview with Resident #5 on 6/1/16 at 4:55pm revealed:</p> <ul style="list-style-type: none"> <li>- " I ask for food and drink in-between meal times. "</li> <li>- " They have small portions of food. "</li> <li>- " I ask for seconds at meal times and I get seconds if they have them. "</li> <li>- " If they don ' t have seconds, I don ' t have anything else. "</li> </ul> <p>Interview with Administrator and Staff A, SIC on 6/1/16 at 5:00pm revealed:</p> <ul style="list-style-type: none"> <li>- " We offer seconds if residents ask for them. "</li> <li>- " If we don ' t have same food to give them for seconds, we give them another food to equal this. "</li> </ul>	C 271		

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C 271	Continued From page 13  - " We always give residents seconds when asked. " - Some residents want to eat all day.	C 271		
C 292	10A NCAC 13G .0905 (d) Activities Program  10A NCAC 13G .0905 Activities Program  (d) There shall be a minimum of 14 hours of a variety of planned group activities per week that include activities that promote socialization, physical interaction, group accomplishment, creative expression, increased knowledge and learning of new skills. Homes that care exclusively for residents with HIV disease are exempt from this requirement as long as the facility can demonstrate planning for each resident's involvement in a variety of activities. Examples of group activities are group singing, dancing, games, exercise classes, seasonal parties, discussion groups, drama, resident council meetings, book reviews, music appreciation, review of current events and spelling bees.  This Rule is not met as evidenced by: Based on observation and interview, the facility failed to assure a minimum of 14 hours of planned group activities per week were offered to residents to promote socialization, physical interaction, group accomplishment, creative expression, increased knowledge and learning of new skills.  The findings are:  Observation of the Activity Calendar during the initial tour on 6/1/16 at 10:48am revealed there was no activity calendar for the facility posted.	C 292		

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C 292	<p>Continued From page 14</p> <p>Observation on 6/1/16 from 9:30am to 10:51am revealed:                      -One resident sitting at the kitchen table talking on the phone and looking at his lap top computer.                      -One resident sat in a chair in the living room looking out the window.                      -One resident out on front porch texting on her phone.                      -Two residents were out of the facility.                      -There were no activity supplies observed during this time.</p> <p>Observations on 6/1/16, 6/2/16 and 6/3/16 at various times revealed no scheduled activities taking place during survey.</p> <p>Confidential interviews with five residents on 6/1/16 and 6/2/16 revealed:                      -"There's nothing much for us to do except watch TV."                      - "We just entertain ourselves."                      - I don't get into Bingo and that kind of stuff, I used to go walking but I don't do that anymore."                      -3 of 5 residents stated they participated in the church outings offered twice weekly.                      -2 of 5 residents stated they were taken by facility staff on frequent outings to shop.                      -One resident stated he went to the church across the street from the facility.</p> <p>Interview with the Administrator on 6/3/16 at 11:40am revealed:                      -There were some art supplies for arts and craft activity and board games for the residents in the locked room where the hot water tank was.                      -There were some coloring boards available for residents who wanted to do them.                      - "We usually do the calendar on the first day of the month. We are in the process of developing</p>	C 292		

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C 292	<p>Continued From page 15</p> <p>our activity program." -"We plan to have arts and crafts and play games and UNO, Bingo, fishing, volleyball, take them to the swimming pool, play basketball and horseshoes." -"They really like to play UNO."</p> <p>Observation on 6/3/16 at 2:10 pm revealed a bookshelf in the locked hot water tank room revealed: -Games available for resident use included: Yahtzee, Uno, chess, Scrabble, and Operation. -The games coloring books and cards were not accessible to the residents.</p>	C 292		
C 912	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to assure the residents received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations related to hot water temperatures.</p> <p>The findings are: Based on observations, record reviews and interviews, the facility failed to assure hot water temperatures for 5 of 5 assisted living residents' bathroom areas and 1 of 1 main shower and bath room area were maintained between 100 degrees</p>	C 912		

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C 912	Continued From page 16  Fahrenheit (F) and 116 degrees F. Refer to Tag 10A NCAC 13 G .0317 Hot water safety (Type A2 Violation).	C 912		