

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  FCL011298	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01  B. WING: _____	(X3) DATE SURVEY COMPLETED  04/07/2015
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NAME OF PROVIDER OR SUPPLIER  HAYWOOD HEIGHTS FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 17 EUCLID BOULEVARD ASHEVILLE, NC 28806
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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)	(X6) COMPLETE DATE
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C 000	<p>Initial Comments</p> <p>Report by Suzanna Fay</p> <p>DHSR Construction Section conducted a Biennial Survey on April 7, 2015 from 3:42 p.m. to 5:15 p.m. at the above referenced facility. DHSR records indicate the home was first licensed on July 13, 1995 as a Family Care Home for six (6) Residents with no more than three who are non-ambulatory (unable to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 1992 "Rules for Family Care Homes Minimum and Desired Standards and Regulations," applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 (1995 Revision) North Carolina State Building Code - Section 514.2 - Residential Care Facilities.</p> <p>At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:</p>	C 000	<p>CONSTRUCTION SECTION</p> <p>MAY 13 2015</p> <p>RECEIVED</p>	
C 117	<p>Have Current San. And Fire Safety Approvals</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION</p> <p>(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: 1. Based on interview with the staff, the most recent Fire Inspection Report available at the site was dated October 1, 2012. Fire Inspections are required to be conducted annually. Provide</p>	C 117		

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

TITLE

(X6) DATE

*Suzanna Mackelverne* Administrator

5-12-15

PRINTED: 04/15/2015  
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C 117	Continued From page 1 copies of the last two years' Fire Inspection Reports to DHSR/Construction Section with your signed Plan of Corrections. Maintain copies of the current inspections at the facility.	C 117	Fire Inspections performed	4-8-15 *
C 174	Building Equipment Maintained Safe, Operating  SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (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. (j) This Rule shall apply to new and existing family care homes.  This Rule is not met as evidenced by: 1. Observations during the time of this survey revealed that the weather-stripping at the kitchen exit door has pulled off and is dragging along the floor and the face of the door at the bottom is beginning to rust. Have a qualified person repair the weatherstripping and paint or replace the door. Provide verification of the repairs.  2. It was observed that the kitchen countertops are in poor conditlon. There are several places where the laminate is worn through, the edgeband is cracked and broken in several locations and the counter around the corner seam by the sink has delaminated. The counter has mold along the surface by the sink. Have a qualified person replace the kitchen countertops. Provide documentation of the repairs.  3. It was observed that the side panels of the kitchen base cabinets are delaminating along the bottom. Have a qualified person repair or replace	C 174	All will be repaired	5/25/15
			All will be repaired	6-7-15 <del>5/25/15</del>
			All will be repaired	6-7-15

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STATE FORM

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If continuation sheet 2 of 7

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NAME OF PROVIDER OR SUPPLIER  HAYWOOD HEIGHTS FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 17 EUCLID BOULEVARD ASHEVILLE, NC 28808		
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C 174	<p>Continued From page 2</p> <p>the damaged panels. Provide documentation of the repairs.</p> <p>4. In the dining room, it was observed that the outlet on the window wall by the desk was not secure and there was an opening in the wall at the plate. The outlet on the wall outside the staff area was broken at the bottom plug. Have a qualified person repair the wall and replace or repair the outlets in the dining room. Provide documentation of the repairs.</p> <p>5. In the pantry, it was observed that the ceiling along the exterior wall was spalling. Have a qualified person repair the ceiling. Provide documentation of the repairs.</p> <p>6. During this survey, several items were observed in the Client bathrooms that need repair. These items include:</p> <p>a. The caulking around the sinks was cracked and splitting. Recaulk the sinks.</p> <p>b. The ceilings over the tub and shower units was spalling. Have a qualified person repair the ceiling.</p> <p>c. The walls above the tubs and shower surrounds were flaking and had mold spots along the edge. Have a qualified person thoroughly clean the walls and repair the damaged paint.</p> <p>d. The fans in all bathrooms were coated with a heavy layer of dust and the fan blades are not turning. Have a qualified person clean the fans and repair as necessary to have adequate ventilation in the bathrooms.</p> <p>e. The floors around the toilets are stained. Have a qualified person repair the damaged flooring.</p> <p>f. The wall at the corner of the shower was damaged and dirty. Have a qualified person</p>	C 174	<p>Outlets to be replaced/repared</p> <p>Ceiling to be repaired</p> <p>a-g. All to be repaired</p>	<p>5/25/15</p> <p>5/25/15</p> <p>5/25/15</p>



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C 174	Continued From page 4  During the survey, a bulb was installed and the cover was replaced. Therefore, no response is required for this deficiency.  13. During the survey, the smoke detectors were tested with canned smoke. The smoke detectors in the facility are interconnected with battery back up. The smoke detector in Bedroom 2 did not set off the other smoke detectors in the facility. Have a qualified person make the necessary repairs to have this smoke detector interconnected with the other smoke detectors in the facility. Provide documentation of the repairs.  14. It was observed that the heat detector in the attic had become disengaged from its base. Have a qualified person secure the heat detector. Provide verification of the repairs.  15. At the front of the facility to the right of the porch, it was observed that a section of the fascia trim had fallen and was hanging down from the soffit. Further investigation revealed that the entire fascia board along the front right side of the facility was rotted. Have a qualified person replace the damaged fascia along this section of the facility. Provide documentation of the repairs.  16. During this survey it was observed that a section of the siding over the living room window was loose. Have a qualified person secure the siding. Provide verification of the repairs.  17. A small gap in the siding was observed outside of Bedroom 1. Have a qualified person repair the siding. Provide verification of the repairs.  18. During this survey, it was observed that a section of the gutter outside of Bedrooms 2 and 4	C 174	13-20- All to be repaired	6-7-15

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C 174	<p>Continued From page 5</p> <p>was sagging and falling away from the building. Have a qualified person repair the gutter along the front of the facility. Provide verification of the repairs.</p> <p>19. It was observed that the gutter along the back of the facility was full of pine needles and other debris. Have a qualified person clean the gutters. Provide verification of the repairs.</p> <p>20. It was observed that a section of the gutter over the kitchen exit had been damaged and was dripping water over the kitchen exit. Have a qualified person repair the gutter. Provide documentation of the repairs.</p> <p>21. A car battery was observed sitting on blocks at the back of the facility. Have the battery removed and properly disposed of. Provide verification of the correction.</p> <p>22. A couple of sections of siding outside of Bedroom 6 were observed to be loose. Have a qualified person secure the siding. Provide verification of the repairs.</p> <p>23. At the time of this survey, the exterior corner trim at both corners outside the staff area were damaged at the bottom. Have a qualified person repair the damaged section and provide documentation of the repairs.</p> <p>24. At the time of this survey, several small holes were observed in the siding along the side facing the drive. Have a qualified person repair the damaged sections of siding. Provide documentation of the repairs.</p>	C 174	<p>Removed WILL SEND PICTURE</p> <p>All to be repaired</p>	<p>4-10-15</p> <p>6-7-15</p>

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C 157	Continued From page 6	C 157	<p>To remain in compliance facility admin. will inspect weekly all building maintenance with documentation. This will be ongoing as preventive measure.</p>	
C 157	<p>Fire Safety-Any Other City Ordinances</p> <p>T10: 42C .2213 FIRE SAFETY EQUIPMENT (c) Any other fire safety requirements required by the city ordinances or county building inspectors must be met.</p> <p>This Rule is not met as evidenced by: 1. Review of an October 1, 2012 Fire Inspection showed that the fire inspector had requested that the pull stations be inspected. The pull stations have the glass tubes. The tubes are coated with a layer of grime and do not appear to have been used or tested recently. Have a qualified vendor inspect the pull stations and fire alarm system annually. Maintain copies of the annual inspections at the facility. Provide a copy of the most current inspection to DHSR/Construction Section with your signed Plan of Corrections.</p>	C 157		