

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/08/2015
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NAME OF PROVIDER OR SUPPLIER PLEMMONS FAMILY CARE HOME # 1	STREET ADDRESS, CITY, STATE, ZIP CODE 303 HI ALTA AVENUE 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)	(X5) COMPLETE DATE
C 000	<p>Initial Comments</p> <p>Report of Biennial Construction Survey by Frank Strickland on 05/08/2015:</p> <p>Records indicate that this facility was first submitted on 06/01/1984 as a Family Care Home. This facility is licensed for a capacity of six (6) ambulatory residentsw (able to evacuate ithout physical or verbal assistance during an ecmergency). Based on this information, this facility is required to meet the 1984 " rules for family care homes minimum, desired standards regulations " , the applicable portions of the 2005 " regulations for family care homes " and the 1978 Edition of the North Carolina State Building Code Section 409.1(G). Residential Care Facility</p> <p>There were deficiencies cited at the time of this survey and a Plan of Correction is required.</p>	C 000		
C 147	<p>Outside Entrances/Exits-Single Hand Motion</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS</p> <p>(d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled.</p> <p>This Rule is not met as evidenced by: 1-Based on observation, the facility has exit doors that do not operate by a single motion. This will effect all residents and staff in the event of a life-safety emergency.</p> <p>Findings on 05/08/2015 The front and rear exit does do not have single</p>	C 147		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 147	Continued From page 1 motion door hardware.	C 147		
C 148	<p>Outside Entrances/Exits-Free of Obstructions</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (e) All entrances/exits shall be free of all obstructions or impediments to allow for full instant use in case of fire or other emergency.</p> <p>This Rule is not met as evidenced by: Based on observation, the facility has not maintained clear paths of egress. This will effect all residents and staff by blocking the exit.</p> <p>Findings on 04/23/2015 The facility has firewood stacked in the rear exit Hallway.</p>	C 148		
C 153	<p>Houskeeping And Furnishings-Clean, Repaired</p> <p>SECTION .0300 - THE BUILDING 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; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by: 1-Based on observation, the facility has not maintained the surfaces in the bathing areas. This will effect all residents.</p> <p>Findings on 05/08/2015</p>	C 153		

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C 153	Continued From page 2 All of the grout around the tub sidewalls has deteriorated and mold/mildew is present.	C 153		
C 172	Fire Safety-Four Rehearsals SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved. This Rule is not met as evidenced by: 1-Based on observation, the facility has not had at least four fire rehearsals. This will effect the life-safety operation of the facility if staff and residents are not trained to react in the event of an emergency creating an unsafe condition. Findings on 05/08/2015 The facility has not maintained or provided copies of the required fire rehearsals.	C 172		
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.	C 174		

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C 174	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by:</p> <p>1-Based on observation, the facility has construction that is incomplete. This will effect all residents and staff in the event severe weather by letting water into the facility.</p> <p>Findings on 05/08/2015 The main roof covering construction is incomplete at the ridge due to recent re-roof construction,</p> <p>2-Based on observation, the facility does not maintain equipment neccessare for testing the Fire Alarm system. This could effect all residents and staff in the event the alarm does not work in a fire/smoke emergency.</p> <p>Findings on 05/08/2015 The emergency pulls could not be tested because the provider did not have the reset key.</p>	C 174		