PRINTED: 06/12/2015
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING	(X3) DATE SURVEY COMPLETED
	FCL011035		05/08/2015

NAME OF PROVIDER OR SUPPLIER: PLEMMONS FAMILY CARE HOME # 1

STREET ADDRESS, CITY, STATE, ZIP CODE: 303 HI ALTA AVENUE, ASHEVILLE, NC 28806

(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**	C 000		
	Report of Biennial Construction Survey by Frank Strickland on 05/08/2015:		CONSTRUCTION SECTION JUL 06 2015 RECEIVED	
	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)~~ 5 ambulatory residentsw (able to evacuate ithout physical or verbal assistance during an ecmergeny). 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			
	There were deficiencies cited at the time of this survey and a Plan of Correction is required.			
C 147	Outside Entrances/Exits-Single Hand Motion	C 147		
	SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (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.		will be put in single hand motion knobs. to outside entrance and exits.	7-25-15
	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.			
	Findings on 05/08/2015 The front and rear exit does do not have single			

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Sharon Plemmons TITLE: Administrator (X6) DATE: 7-6-15

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	FCL011035		05/08/2015

NAME OF PROVIDER OR SUPPLIER: PLEMMONS FAMILY CARE HOME # 1

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C 147	Continued From page 1 motion door hardware.	C 147	Will be remove Door knobs from front and rear exit and make sure they are single motion hard ware, at Doors at all times	7-25-15
C 148	Outside Entrances/Exits-Free of Obstructions 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. 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. Findings on 04/23/2015 The facility has firewood stacked in the rear exit Hallway.	C 148	old worker that was fired had put fire wood in exit area there will be nothing in the pathway of any exit area at anytime I will keep a check + make sure exit are always clear of any objects. And make sure workers are aware of the serious of this matter	7-6-15 Done.
C 153	Houskeeping And Furnishings-Clean, Repaired 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. 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. Findings on 05/08/2015	C 153		

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	FCL011036		05/08/2015

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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C 153	Continued From page 2 All of the grout around the tub sidewalls has deteriorated and mold/mildew is present.	C 153	The tub has been grouted around tub + sidewalls. will keep a check on this on a month basis	7-6-15 Done
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	fire Rehearsals were done faxing you copy's of them with this form of action.	5-8-15 Done
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	Continued From page 3	C 174		
	This Rule is not met as evidenced by: 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. Findings on 05/08/2015 The main roof covering construction is incomplete at the ridge due to recent re-roof construction,		Roof is completed whole house has brand new Roof.	6-30-15 Done
	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. Findings on 05/08/2015 The emergency pulls could not be tested because the provider did not have the reset key.		Found the Reset Key tapped to pulled down in my bedroom.	6-30-15 Done
			Fire Box has been service and in working order - thru all house	7-2-15 Done

FIRE REHEARSAL SCHEDULE

Name of Home: Plemmons F[illegible] FCH/HA/DDA

Address: 303 [illegible] Ave

1. Date of Rehearsal: 6/13 Time of Rehearsal: 600 PM Shift: [illegible] 3rd (circle one)

Person in Charge: S. Plemmons

Other Staff Members Present: Brittany Cassida

Patents 3 went out front Door + 2 patents went out Back Door.

Time for Total Evacuation: 3 mins

Brief Description of What Was Involved: Patents in in front of House went out front Door. Patent in back 2 Bedrooms went out Side Door thru Breezeway, all Patents meet at ~~Bre~~ Back Mail Box in front of house. Everything went great.

S. Plemmons

2. Date of Rehearsal: Time of Rehearsal: Shift: 1st - 2nd - 3rd (circle one)

Person in Charge:

Other Staff Members Present:

Time for Total Evacuation:

Brief Description of What Was Involved:

(over)

May 2015

FIRE REHEARSAL SCHEDULE

Name of Home: Plemmons FCH FCH/HA/DDA

Address: 303 Hi HIM Ave.

1. Date of Rehearsal: 5/2/15 Time of Rehearsal: 10 Am Saturday Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: Sharon Plemmons

Other Staff Members Present: NO

3 Residents went out front DOOR

2 Residents went out Side thru Breeze way Door

Met at black mail box

Time for Total Evacuation: 2 min. 50 Seconds

Brief Description of What Was Involved: everything Went Smoothly all Residents New exactly what to do!

2. Date of Rehearsal: 5/30 Time of Rehearsal: 3pm Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: Sharon Plemmons

Other Staff Members Present: Brittany Cassida

Time for Total Evacuation: 3 min 10 Seconds

Brief Description of What Was Involved: 3 residents went out front Door. 2 Residents Went out Side door thru breeze way Meet @ Black Mail Box

(2015)

FIRE REHEARSAL SCHEDULE

Name of Home: [illegible] PCH/NA/CDA

Address: [illegible]

1. Date of Rehearsal: 4/12/15 Time of Rehearsal: 2:00PM Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: S Plemm

Other Staff Members Present: NA

(5) all Residents, went out front door to mailBox 2 min 25 seconds

Time for Total Evacuation: 2 min 25 seconds

Brief Description of What Was Involved:

Took all Residents out front good job no problems Straight to mailbox.

2. Date of Rehearsal: 4/26/15 Time of Rehearsal: 2pm Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: Shan Plemm

Other Staff Members Present: None

all patients 3 went out front door, 1 Resident out of facility Brazoway met @ MailBox

Time for Total Evacuation: 2 min 10 seconds

Brief Description of What Was Involved:

Moving 1 Resident thru kitchen out back 3 Residents out front No problems everyone followed instructions moved very smoothly

S Plemm

2:30pm.

Plemmons Fire Rehearsal Scdule

1) Date of Rehearsal 3/5/15 10:30 AM 1st Shift

Person in charge - Sharon Plemmons - Adm.

Other staff - James Bellway

2 Residents went out ~~[illegible]~~ Door of home

2 Residents went back of house, thru Breezeway exit,

met @ mailbox 4 mins

Sharon Plemmons
3/5/15

2) Date of Rehearsal

3/31/15

213-5335

FIRE REHEARSAL SCHEDULE

Name of Home: [illegible] FCH/HA/CDA

Address: [illegible]

1. Date of Rehearsal: 1/25/15 Time of Rehearsal: 12:30 pm Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: James Belley

Other Staff Members Present:

Time for Total Evacuation: Six Mins

Brief Description of What Was Involved:

all residents left the Building and met at Mail Box.

2. Date of Rehearsal: 2/14/15 Time of Rehearsal: 2am Shift: 1st - 2nd - 3rd (circle one)

Person in Charge: Sharon Plemme

Other Staff Members Present: 3 patients went out front Door 2 patients went out Side thru Breezeway [illegible] Mail Box took Appro 3 min 52 seconds

Time for Total Evacuation: 3 min 52 seconds

Brief Description of What Was Involved: 3 patient went thru front Door 2 patient went out Side thru Breezeway Meta + Mail Box

[signature]