

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011286	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 09/30/2015
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NAME OF PROVIDER OR SUPPLIER KNOB HILL FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 90 KNOB HILL ROAD 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
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C 000 Initial Comments

Report by Paul Dixon

DHSR Construction Section conducted a Biennial Survey on September 30, 2015 from 1:25 PM to 2:55 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 24, 1981. Licensure rules at this time only allowed for a maximum capacity of 5 Residents. Effective on April 1, 1984 Licensure Rules were revised to allow for a maximum capacity of six all ambulatory residents. This home is currently licensed for Six (6) all-ambulatory residents (able to evacuate and respond without any physical or verbal assistance during an emergency). Based on this information we are requiring the home to maintain compliance with the following: the 1977 "Rules for Family Care Homes Minimum and Desired Standards and Regulations", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, the 1978 (Rev 3) North Carolina State Building Code - Section 409.1(g) - Residential Care Facilities.

NOTE: This Facility is not currently serving any Residents.

At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:

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.

C 000

CONSTRUCTION SECTION
OCT 22 2015
RECEIVED

LOWE'S

LOWE'S HOME CENTERS, LLC
89 SOUTH TUNNEL ROAD
ASHEVILLE, NC 28805 (828) 299-3788

- SALE -

SALES#: 80617RS1 1537542 TRANS#: 24998892 10-04-15

28296 BROWN HOOD FILTER 8PQTF (51.96
4 0	12.99
90 445057 BROWN FILTER 30-IN 8PJDFR	24.99
<i>knobhill?</i>	
SUBTOTAL:	76.95
TAX:	5.39
INVOICE 17451 TOTAL:	82.34
N/C:	82.34

N/C:XXXXXXXXXXXX7926 AMOUNT:82.34 AUTHCD:05874E
SWIPED REFID:993930061717 10/04/15 17:25:30
CUSTOMER CODE: busn0888

[Signature]

STORE: 0617 TERMINAL: 17 10/04/15 17:25:35
OF ITEMS PURCHASED: 5
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>[Signature]</i>	TITLE Administrator	(X6) DATE 10/22/15
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C 174	Continued From page 1 (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: Observations during the survey showed that the range hood grease filters were missing. Obtain and install new grease filters in the hood. Provide the DHSR Construction section with copies of all invoices, work orders, receipts, photographs and any other supporting documentation concerning this repair.	C 174	<i>provided range hood grease filters.</i>	<i>10/4/15</i>
C 183	Outside Premises-Clean, Safe SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. This Rule is not met as evidenced by: 1. Observations during the survey showed that the paint on the fascia and soffit over the front bedroom windows was peeling badly. Have the loose paint removed and have the soffits and fascia repainted. Provide the DHSR Construction section with copies of all invoices, work orders, receipts, photographs and any other supporting documentation concerning this repair. 2. Observations during the survey showed that the paint on the fly rafters where the roof changes height was peeling badly. Have the loose paint removed and have the rafters repainted. Provide the DHSR Construction section with copies of all invoices, work orders, receipts, photographs and any other supporting documentation concerning this repair.	C 183	<i>will be removed & re-painted until</i> <i>will be removed & re-painted until</i>	<i>11/15/15</i> <i>11/15/15</i>