STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL092142	A. BUILDING: **01** B. WING _____	C **08/04/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FALLS RIVER VILLAGE ASSISTED LIVING COI	**1110 FALLS RIVER AVENUE RALEIGH, NC 27614**

(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 Report of a Complaint Investigation by Billy S. Bryant conducted on 08/04/2016. Records indicate this facility was first licensed on 06/23/1998. The facility is currently licensed for 60 Beds. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1996 (1998 Revision) Edition of the North Carolina Building Code(s), Institutional Occupancy and the 1996 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure. Complaint stated that since the kitchen in the building was not in operation do to renovation work, meals are being prepared from a kitchen in a memory care building adjacent to the facility and operatred by the same provider. Complaint stated that meals were often cold when served. The complaint was substantiated.	C 000		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.	C 189		

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C 189	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation the lichen equipment is not in an operating condition. Findings on 08/04/2016: a. The kitchen stove/oven is not operational due to kitchen renovations that have been delayed for several months. b. The kitchen refrigerator and freezer are unplugged and are not being used. c. A stop work order for the kitchen renovation has been issued by u the City of Raleigh Inspections Department until plans are submitted to the Health Department for review.	C 189		