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	Falls River Village will assure all meals are served according to appropriate temperatures. Beginning 9.19.2016 a temperature log book will be kept in both buildings – so the temperature can be taken and recorded by the Cook as it is prepared to leave the memory care kitchen – food will then be wrapped and covered for transport to the assisted living dining room next door– then the Cook will take the temperature and record – to assure meals temperatures are in compliance and will immediately address any temperatures not appropriate for service. This process will continue until renovation is complete and the Assisted Living kitchen has been inspected and is in full working order.	9.19.16 thru Reno completion
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	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.	

Division of Health Service Regulation

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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	a.The kitchen stove /oven is not operational due to kitchen renovations that have been delayed for several months. The stove/oven will remain not operation until The completion of the renovation and all applicable Inspections have been completed. b.The kitchen refrigerator and freezer are unplugged and are not used. The kitchen refrigerator and freezer will remain unplugged and not in use until the completion of the renovation and all applicable inspections have been completed. We are utilizing a small stand up refrigerator in the dining room at this time and will continue until completion of renovation c. A stop work order for the kitchen renovation has been issued by the City of Raleigh Inspection Department until plans are submitted to the Health Department for review. Falls River self-reported to Wake County Health Inspector when we felt our previous contractor was not operating appropriately. Falls River Village is working diligently to be compliant in this rule area. 7.20.16 we received a Stop Work Order from John Hyman –City of Raleigh. Approximately 8.2.16 Falls River Village terminated old contractor, " Blue Sky". We have an agreement with a new contractor BBMK Contracting, LLC. The proper permits have been pulled and paid for as of 8.23.16. Falls River has been granted permission to proceed with the project as of 9.20.16 from the NC Department of Health and Human Services – Division of Health Service Regulation – Construction Division. Contractor has finalized timeline/schedule for this project and all necessary inspections.	

11.14.16 will notify NCDHH construction team Change

Length Wy-Curin Executive Director
9.23.2016