

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL005013	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/24/2017
NAME OF PROVIDER OR SUPPLIER ASHE ASSISTED LIVING & MEMORY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 182 CHATTYROB LANE WEST JEFFERSON, NC 28694		
(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 Construction Section Biennial Survey by Dennis Harrell on 5-24-2017. Records indicate that this facility was first licensed on 3-25-2011, for 55 beds including 24 beds in a Special Care Unit. Based on this information, the facility was surveyed using the 2005 Rules for the Licensing of Adult Care Homes for Seven or More Beds and the 2009 NC State Building Code(s).	C 000		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: Based on observation, the hose on the shower wand in the Beauty Salon was long enough to reach the sink basin and there was no vacuum breaker provided. Hoses on water fixtures that are long enough to reach the flood rim of the fixture present the possibility of siphoning contaminated water into the water system unless a vacuum breaker is installed.	C 166	C166 A vacuum breaker for the hose was ordered and was installed on the day of arrival.	6/13/2017
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS	C 189		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

5TBQ21

If continuation sheet 1 of 2

6-15-17

Division of Health Service Regulation

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C 189	Continued From page 1 (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. This Rule is not met as evidenced by: 1. Based on observation, a corridor door was prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Finding includes; The ¾ hour fire rated door to the pantry, which was substantially larger than 100 square feet was tied open. This fire rated door must be self-closing and must automatically latch when closed. 2. Based on observation, the building was not maintained in a safe condition because a room intended for use as a bedroom was being used for a storage room. The bedroom was not designed and built to contain the additional combustible load. Finding includes; Bedroom AL31 contained 11 mattresses, 2 wood chests of drawers, 1 wood table and 1 combustible chair.	C 189	C189 The corridor (pantry) door noted was immediately closed and the obstruction added to prevent quick closure was removed. The staff were retrained regarding building and fire safety guidelines. A sign was placed on the door to serve as a continual reminder that it is to remain closed. C189 The unoccupied resident room housing stored mattresses and furniture was cleared of all stored materials with the exception of one mattress and bedframe, 1 chest of drawers, one wooden table, and one chair (furnishings sufficient and reasonable for the room to be occupied by a resident). Furnishings were moved to offsite storage until needed in another resident room.	5/24/2017 6/15/2017



