PRINTED: 04/17/2018
FORM APPROVED

Division of Health Service Regulation

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL011296 | A. BUILDING: 01 B. WING | 03/08/2018 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| WINDWOOD ASSISTED LIVING | 6 WINDWOOD DRIVE CANDLER, NC 28715 |

| (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<br><br>Report of Biennial Construction Survey by Suzanne Fay conducted on March 8, 2018.<br><br>Records indicate this facility was first licensed on June 8, 1981 for 12 residents. Based on this information, we are requiring the facility to meet the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, the applicable portions of the 2005 Regulations for Adult Care Homes, and the 1978 (Revision 2) Edition of the North Carolina State Building Code-Section 409.1(c), Institutional Occupancy. | C 000 | | |
| C 111 | Must Have Current San. & Fire Safety Reports<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(<br>f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.<br><br>This Rule is not met as evidenced by:<br>1. Review of records revealed that the facility did not maintain current fire safety inspection reports in the home.<br><br>Findings on March 8, 2018:<br>a. A copy of the current inspection report for the fire alarm system was not available for review. | C 111 | | |
| C 130 | Bathrooms-For Staff and Visitors<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT<br>(a) The requirements for bathrooms and toilet | C 130 | | |

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| | HAL011298 | A. BUILDING: 01 B. WING | 03/08/2018 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| WINDWOOD ASSISTED LIVING | 6 WINDWOOD DRIVE CANDLER, NC 28715 |

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| C 130 | Continued From page 1<br>rooms are:<br>(3) Toilets and baths for staff and visitors shall be in accordance with the North Carolina State Building Code, Plumbing Code;<br><br>This Rule is not met as evidenced by:<br>1. Based on observation, the facility did not provide the required toilet rooms for guests. The 1977 Licensure Rules require a separate half bath, one for males and one for females, for non live-in staff and visitors.<br><br>Findings on March 8, 2018:<br>a. The half bath for males is being utilized as a storage room. | C 130 | The boxes stored in this ½ bath male visitor, have been removed.<br>Staff has been instructed not to use this as storage in the future. | |
| C 164 | Housekeeping and Furnishings-Clean, Repaired<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS<br>(a) Adult care homes shall:<br>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;<br>(2) have no chronic unpleasant odors;<br>(3) have furniture clean and in good repair;<br>(e) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the walls were not maintained clean and in good repair.<br><br>Findings on March 8, 2018:<br>a. Ladies bath - the wall finish behind the sink was deteriorating and flaking off.<br>b. Ladies bath - the ceramic wall tile at the tub was buckling and loose at the faucet wall.<br>c. Kitchen - there was a pile of debris made up of | C 164 | A. Wall behind sink has been repaired<br>B. Ceramic tiles have been repaired<br>C. debris behind refrigerator in kitchen has been removed<br>Maintance will conduct a thorough monthly inspection noting any repairs need and report to the Administrator.<br>Housekeeping has been increased an extra hour per day to insure prompt cleaning. | |

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| C 164 | Continued From page 2<br>lint, dirt and chewed up paper coming out from behind the refrigerator.<br>d. Shower bath - there was a substantial amount of mildew and soap scum on the tile at the shower walls.<br>e. Room 4 - the veneer is coming off of the closet door on the right leaving a rough, splintered edge.<br><br>2. Observations revealed that the floors were not maintained in a clean manner.<br><br>Findings on March 8, 2018:<br>a. Room 2 - the floor of this room was covered in bird seed, clothing and dirt. | C 164 | d. Tiles in Shower have been cleaned.<br>Housekeeping has been increased an extra hour per day To insure Prompt Cleaning<br><br>e. door has been repaired<br>Maintance will conduct a through Monthly Inspection noting any Repairs needed and report to the Administrator. | |
| C 166 | Housekeeping-Maintained Free of Hazards<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS<br>(a) Adult care homes shall:<br>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;<br>(e) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the facility was not maintained free of hazards. Loose floor tile can cause injury from slipping or falling.<br><br>Findings on March 8, 2018:<br>a. Room 2 - there is a broken and loose floor tile at the entrance to the room within the door swing. | C 166 | A. This room has been cleaned.<br>Housekeeping has been increased an extra hour per day to insure Prompt Cleaning<br><br>A. The floor tiles have been replaced.<br>Maintance will conduct a through Monthly Inspection noting any needed repairs and report to the Administrator | |
| C 185 | Fire Safety-Rehearsals on Each Shift | C 185 | | |

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| | HAL011286 | A. BUILDING: 01 B. WING | 03/08/2018 |

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| C 185 | Continued From page 3<br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0309 PLAN FOR EVACUATION<br>(b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official.<br>(c) 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, the shift, staff members present, and a short description of what the rehearsal involved.<br>(f) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Review of records revealed that the fire rehearsals were not conducted on each shift per quarter.<br><br>Findings on March 8, 2018:<br>a. There was not a fire rehearsal conducted on the 3rd shift for the second quarter of 2017.<br>b. There was not a fire rehearsal recorded for the 2nd or 3rd shift in the third quarter of 2017.<br>c. There was not a fire rehearsal recorded for the 2nd shift in the fourth quarter of 2017. | C 185 | Fire rehearsals were conducted however due to misfiling they were not in the proper folder. Please find included. In the future these will be filed in the quality control book where they can be easily located. | |
| C 189 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(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.<br>(k) This Rule shall apply to new and existing | C 189 | | |

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| C 000 | Initial Comments<br><br>Report of Biennial Construction Survey by Suzanna Fay conducted on March 8, 2018.<br><br>Records indicate this facility was first licensed on June 8, 1981 for 12 residents. Based on this information, we are requiring the facility to meet the 1977 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm, the applicable portions of the 2005 Regulations for Adult Care Homes, and the 1978 (Revision 2) Edition of the North Carolina State Building Code-Section 409.1(c), Institutional Occupancy. | C 000 | enclosed is a copy of the fire marshals inspection a copy of Asheville Fire Protection Co. a copy from Infinity for maintaren and testing. Because Asheville Fire Protection and Infinity required payment they were both filed in the book keeping office. In future it will take Copies to the facility | |
| C 111 | Must Have Current San. & Fire Safety Reports<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(<br>f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.<br><br>This Rule is not met as evidenced by:<br>1. Review of records revealed that the facility did not maintain current fire safety inspection reports in the home.<br><br>Findings on March 8, 2018:<br>a. A copy of the current inspection report for the fire alarm system was not available for review. | C 111 | | |
| C 130 | Bathrooms-For Staff and Visitors<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0306 PHYSICAL ENVIRONMENT<br>(e) The requirements for bathrooms and toilet | C 130 | | |

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| C 189 | Continued From page 4<br>facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the mechanical ventilation was not maintained in operating condition.<br><br>Findings on March 8, 2018:<br>a. There was a pattern of exhaust fans with a heavy accumulation of dirt in the facility.<br>b. Laundry room - there is small hole in the dryer exhaust duct.<br><br>2. Based on observation the electrical equipment has not been maintained in a safe manner. This is a potential shock hazard if receptacles near water sources do not function to provide shock protection.<br><br>Findings on March 8, 2018:<br>a. The bathroom light fixtures have open non-ground fault circuit protected outlets.<br><br>3. Based on observation there is a failure to maintain the buildings's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be effected if doors cannot be closed as required so as to limit the spread of smoke and/or fire to the area of origin.<br><br>Findings on March 8, 2018:<br>a. Living room - the door is held open with the plane. | C 189 | A. Exhaust fans have been cleaned. Maintance has been instructed to clean these monthly when conducting in spection. To insure they are kept clean.<br><br>B. Small hole in dryer exhaust has been repaired.<br><br>A. These outlets have been covered as per your instruction.<br><br>A. Plane has been moved so it is not holding door open. Staff has been instructed To keep a eye on this in future To insure door may be closed | |