

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011381	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 03/26/2024
NAME OF PROVIDER OR SUPPLIER SOUNDVIEW II # 4		STREET ADDRESS, CITY, STATE, ZIP CODE 30 SMITH GRAVEYARD ROAD ASHEVILLE, NC 28806		
(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 by David Hickman DHSR Construction Section conducted a Biennial Follow-up Survey on March 26, 2024 from 8:50am AM to 9:20 AM at the above referenced facility. Not all of the previously cited deficiencies had been corrected at the time of the survey, therefore further action is required. The remaining cited deficiencies are as follows: NOTES: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with on-site staff during the exit interview. 2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.	{C 000}		
{C 172}	Fire Safety-Four Rehearsals SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. 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, staff members present, and a short description of what the rehearsal involved. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that	{C 172}		

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

TITLE

(X6) DATE

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{C 172}	Continued From page 1 the fire drills were not being performed by setting off the alarms, but the staff was yelling fire to perform the drills. This is not compliant with the rule. Take the necessary steps to have the staff perform the drills by activating the alarm. The residents need to be able to respond and evacuate at the sound of the alarm, without staff prompting or assistance. * At the time of the follow up survey, some of the residents still required prompting and assistance to evacuate the house. This is not compliant with the rule. Take the necessary steps to continue to train the residents so they can evacuate without prompting or assistance.	{C 172}		
{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. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the tile floor in the staff bedroom was torn causing a possible trip hazard. This is not compliant with the rule. Take the necessary steps to repair the floor. * This deficiency had not been corrected. 2. At the time of the survey it was observed that there was a wasp nest above the FDC connection and at the end bathroom vent. This is not compliant with the rule. Take the necessary steps	{C 174}		

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{C 174}	Continued From page 2 to remove the wasp nests. * This deficiency had not been corrected. 3. At the time of the survey it was observed that the gutter in the front side of the house was hanging down. This is not compliant with the rule. Take the necessary steps to repair the gutter. * This deficiency had not been corrected. New deficiency observed 4. At the time of the survey it was observed that there were loose oxygen tanks in the front right bedroom. This is not compliant with the rule. Take the necessary steps to store the tanks in a proper rack.	{C 174}		
{C 101}	Construction-Meet Building Code at Initial T10: 42C .2102 CONSTRUCTION (a) The home must meet applicable requirements of Volume I and I-B of the North Carolina State Building Code in force at the time of initial licensure. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the building was not in compliance with Section 419.3.1 of the North Carolina State Building Code. The building does not have the proper radiation dampers for the air ducts which is compromising the one-hour construction rating. The building is sprinklered but does not have the proper coverage due to most of the closets in the resident rooms and the staff bathroom do not have sprinkler heads installed. This is not compliant with the rule. Take the necessary steps to add the proper radiation dampers in the air	{C 101}		

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{C 101}	Continued From page 3 duct penetrations to maintain the one hour construction rating or add the additional sprinkler heads needed in the unprotected areas. Note: NCSBC Section 419.3.1: The building shall be of one-hour construction or sprinklered in accordance with NFPA 13R. Sprinklers, if provided, shall be installed in all areas except attics, crawl spaces, and floor/ceiling spaces, but including staff toilets and clothes and linen closets . The extinguishing system shall be electrically connected directly to an approved central station facility. * This deficiency had not been corrected.	{C 101}			