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
	HAL018040	A. BUILDING: 01 B. WING _____	08/20/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CATAWBA VALLEY ASSISTED LIVING	4174 SHOOK ROAD CONOVER, NC 28613

(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 Tod Hancock conducted on August 20, 2024. Records indicate this facility was first licensed as a Home for the Aged serving 80 residents on October 2, 2004. Therefore, the facility must meet the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 2002 North Carolina State Building Code - General Construction - Section 407 Institutional Occupancy (Group I-2). Deficiencies were cited and a Plan of Corrections is required.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(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. This Rule is not met as evidenced by: 1.Based on an interview with the Executive Director and Maintenance Director the facility failed to maintain in the facility, current (completed within the last twelve months) sanitation and fire and building safety inspection reports available for review. Findings August 20, 2024: a. There was no Fire Official (Fire Marshal) report available for review.	C 111	C 111-Fire Marshall was behind schedule due to conflicts. He inspected on August 21, 2024 and the final report with no deficiencies is attached.	8/21/24
C 189	Building Equipment Maintained Safe, Operating	C 189		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL018040	A. BUILDING: 01 B. WING _____	08/20/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CATAWBA VALLEY ASSISTED LIVING	4174 SHOOK ROAD CONOVER, NC 28613

(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 189	Continued From page 1 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. This Rule is not met as evidenced by: 1. Based on observation the facility is not maintaining its Heating, Ventilation and Air Conditioning (HVAC)system. Findings August 20, 2024: a. 100 Hall- #4- Laundry- Based on observation and Interviews with Staff the air conditioning unit serving this area is not operating.	C 189	C 189 The #4 Laundry Room A/C unit is ordered and awaiting the arrival of the part for installation by Century Services by the end of September. Attached is the quote for service that has been approved.	Install 9/30/24
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e)	C 199	C 199 The exhaust fan wheels have been ordered and we are awaiting the arrival of the part to complete the correction by the end of the week 9/21/24. Attached it the part ordered for correction.	9/20/24

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL018040	A. BUILDING: 01 B. WING _____	08/20/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CATAWBA VALLEY ASSISTED LIVING	4174 SHOOK ROAD CONOVER, NC 28613

(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 199	Continued From page 2 which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the buildup humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings August 20, 2024: a. 100 Hall- Zone 1-The exhaust fan serving this area is not working.	C 199		

Ana Wilson
Administrator
9/23/24

CITY OF CONOVER FIRE DEPARTMENT

INSPECTION REPORT

NULL, CATAWBA VALLEY LIVING AT ROCK BARN, 4174 SHOOK RD, BLDG UNNAMED, CONOVER NC 28613

DETAILS

Inspection Date: 08/21/2024 | Inspection Type: Level III Inspection | Inspection Number: 3125 | Shift: N/A |
Station: 1 - CONOVER FIRE STATION #1 | Unit: 15-C3 | Lead Inspector: EDDIE CHAPMAN | Other Inspectors: BRUCE ROSEMAN

VIOLATIONS AND COMPLIANCES

No Violations or Compliances selected to show for this inspection. Please reach out to the lead inspector for more details.
Resolved Violations: 0 | Passed Codes: 0 | Violations: 0 | N/A Codes: 0

NEXT INSPECTION DATE

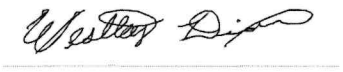
08/08/2025

FEE

Invoice Date: N/A | Inspection Fee: $125.00 | Date Paid: N/A | Amount Paid: N/A | Invoice Number: N/A | Check Number: N/A |
Transaction Number: N/A

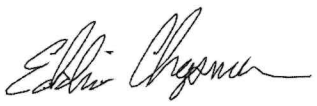
CONTACT SIGNATURE

Westley Dixon
Signed on: 08/21/2024 @ 10:51



INSPECTOR SIGNATURE

EDDIE CHAPMAN
Signed on: 08/21/2024 @ 10:52



QUESTIONS ABOUT YOUR INSPECTION?

EDDIE CHAPMAN
eddie.chapman@conovernc.gov
8286952876

680 Boundary St.
Newton, NC 28658
Phone (828) 466-2112
Fax (828) 465-2666
License #14121 & #18163

Century Services
HEATING & COOLING EXPERTS

Proposal and Agreement

Customer Name: Westley Dixon - Catawba Valley Living Date: 7/23/24

Work Address 4174 Shook Road City/State/Zip Claremont, NC 28610

BillingAddress _____ City/State/Zip _____

Cell Phone: 980-221-5407 Work Phone _____ Home Phone _____

E-mail: westley.dixon@catawbanrc.com Fax: _____

We will furnish and install the equipment listed below which includes material, tax and labor at the price, terms and conditions outlined on this proposal.

Equipment Specifications

☑ Split System ☑ H/P ☑ A/H ☐ A/C ☐ Furnace ☐ Coil ☐ Package H/P ☐ Gas Pack

☑ Change Out Existing Equipment ☐ First Time Install Other _____

Tonage 4/3	SYSTEM 1 Unit #4	SYSTEM 2 Unit #20	SYSTEM 3	SYSTEM 4
BRAND	Trane	Trane		
SEER 2	14	14		
STAGES/EFF	1	1		
O/D MODEL #	XR14	XR14		
I/D MODEL #	TEM4	TEM4		
Price	$10,650	$8,950		
Accessories				
Total Price	$10,650	$8,950		
Utility Rebates				
Misc				

Our installation includes all equipment, electrical, permits, and sales taxes.

1 year warranty labor 1 year warranty on all (Trane) parts 5 year compressor warranty

Misc. _____

* DETAILS *

☑ Haul off old equipment & debris	☑ Condensate pump or drain line as needed	☐ Vent pipe as needed
☑ Refrigerant lines as needed	☑ Necessary duct tie in to existing duct	☐ Gas piping as needed
☑ Digital thermostat	☐ Duct sealing using mastic as needed	☐ Crane services
☑ Low voltage wiring as needed	☑ Aux drain pan & switch as needed	☐ _____
☑ Condenser equipment pad as needed	☐ Attic platform as needed	☐ _____

System #( ) at price of $_____ chosen. **Total Amount due day of job.** Proposal Expires 8/15/24

Staged/draw if applicable = $_____ and balance of $_____ due on completion.
Add 3% if using CC

Customer Signature below represents he/she agrees to the job description above and terms of payment as outlined.

Prepared by Matthew Foster of Century Services

Acceptance: (Customer)_____ Date: _____

RETURN WHITE COPY FOR FILING & SCHEDULING

Hello, these are your estimates

Location: 4174 Shook Road, Claremont, NC, 28610

JOB ID
140628523

Unit Number 4

Your Price
$14,327.30

View

Unit Number 20

Your Price
$12,869.96

Accept Estimate

Summary

Price includes removal of existing equipment and installation of a New York three phase outdoor condenser and new York single phase, indoor air handler to existing high voltage and low-voltage connections, making appropriate adjustments high voltage and ductwork to fit new sizing also the time back into the existing Smoke system to shut the system down in the event of the alarm...

COMM-SPLIT-INTSALL

Your Price
$12,028.00

Install Commercial Split System

3Phase...

View More

Subtotal	$12,028.00
Tax	$841.96
Total	**$12,869.96**

Roll over image to zoom in

Greenheck 473303 Double Row Blower Wheel

Brand: Accurex

Search this page

$21.76

Two-Day

FREE Returns

With **Amazon Business**, you would have **saved $147.06** in the last year. Create a free account and **save up to 7%** today.

Brand	Accurex
Material	plas
Included Components	Replacement Part
Manufacturer	Greenheck

About this item

- Genuine OEM replacement part
- Greenshank is the leading supplier of air movement and control equipment
- Use genuine OEM parts for safety reliability and performance
- Country of origin: United States

Report an issue with this product or seller

Sponsored

$21.76

Two-Day

FREE Returns

FREE delivery Friday, September 20. Order within 11 hrs 48 mins

Deliver to Anna - Catawba 28609

Only 3 left in stock (more on the way).

Quantity: 1

Add to Cart

Buy Now

Ships from	Amazon.com
Sold by	Amazon.com
Returns	30-day refund/replacement
Payment	Secure transaction

See more

Add a gift receipt for easy returns

Add to List

Other sellers on Amazon

New (2) from $21.76

amazon business

Save up to 7% on this product with business-only pricing.

Create a free account

Sponsored

Buy it with

+

+

Total price: $72.09

Add all 3 to Cart

This item: Greenheck 473303 Double Row Blower Wheel
$21.76

Broan-NuTone RE70BN 70 CFM Bathroom Exhaust Fan...
$37.83

GE Genteq Replacement for Capacitor 30/5 uf 370 volt 97F9833,...
$12.50

Some of these items ship sooner than the others.
Show details