STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL086014	A. BUILDING: **01** B. WING _____	**11/19/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RIVERWOOD ALF	**711 W ATKINS DR** **DOBSON, NC 27017**

(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 Biennial Construction Section Survey by Tod Hancock conducted on November 19, 2024. This facility was licensed on August 1, 1970, and is currently licensed for sixty-five Beds. Therefore, the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds and applicable portions of the 1967 Edition of the North Carolina Building Code, Institutional Occupancy. Deficiencies have been cited and a Plan of Correction 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 on November 19, 2024: a. There was no record of a Fire Alarm system inspection available for review.	C 111		

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C 189	Continued From page 1	C 189		
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. This Rule is not met as evidenced by: 1. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be affected if the fire-resistant rated doors do not completely close and latch to help limit the spread of smoke and/or fire to the area of origin. Findings on November 19, 2024: a. Store Porch-Exterior - The door does not latch into its frame. b. Hall-Fire Door- After activation, the door requires excessive force to open. c. Housekeeping Closet- The magnetic hold open on this door does not engage with the magnetic release device. d. Lobby- The magnetic hold open device on the door is broken. e. Room 29- The door does not latch into its frame. 2. Review of records revealed that the facility did not maintain documented evidence of compliance	C 189		

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C 189	Continued From page 2 with applicable fire, sanitation and building codes. Hood inspections are required every six months. Findings on November 19, 2024: a. Kitchen - The last inspection for the kitchen hood suppression system was conducted on January 13, 2023.	C 189		
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) 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 on November 19, 2024: a. Bathroom Near Room 16- The exhaust fan is not working. b. Employee Bathroom- The exhaust fan is not working.	C 199		

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