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FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011295	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 08/05/2025
NAME OF PROVIDER OR SUPPLIER ANGEL HOUSE VII			STREET ADDRESS, CITY, STATE, ZIP CODE 60-C HORNOT CIRCLE 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 The Adult Care Licensure Section and the Buncombe County Department of Social Services conducted an annual survey on 08/05/25.	C 000	SEE Attached		
C 283	10A NCAC 13G .0904 (e)(3) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service Therapeutic Diets in Family Care Homes: (3) The facility shall maintain a current listing of residents with physician-ordered therapeutic diets for guidance of food service staff. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to maintain an accurate and current listing of residents with physician ordered therapeutic diets for guidance of food service staff. The findings are: Observation of the kitchen on 08/05/25 at 9:32am revealed there was not a list of physicians ordered therapeutic diets posted for staff to reference. Review of the facility's request for information sheet revealed there were 3 residents who had therapeutic diet orders for a no concentrated sweets diet. Interview with the Supervisor-in-Charge (SIC) on 08/05/25 at 9:32am and 11:36am revealed:	C 283			

Division of Health Service Regulation

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

TITLE

(X6) DATE

Bianca Gray

Administrator 9/1/25

STATE FORM

6899

1XWD11

If continuation sheet 1 of 2

Reviewed & Acknowledged Julie Broome 9/1/25

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C 283	Continued From page 1 -There were 3 residents residing at the facility with orders for a no concentrated sweets diet. -There was no therapeutic diet orders list posted in the kitchen for staff guidance because he removed the list when the facility got a new refrigerator about a month ago and forgot to put another list up. -He knew what each resident's diet order was because he lived at the facility and prepared all the meals for the residents. -He did not know how relief staff covering for him when he was off work knew what diets were ordered for each resident when they prepared meals. Interview with the Administrator on 08/05/25 at 1:56pm revealed: -She was unaware there was not a therapeutic diet order list posted in the kitchen for staff guidance when preparing the meals. -The SIC told her the therapeutic diet list was not posted in the kitchen because the SIC threw it away when she bought a new refrigerator for the facility in May or June 2025. -Relief staff for the SIC should check the resident records for each resident's diet order before preparing the meals for the residents. -She expected the SIC to keep an updated therapeutic diet order list posted in the kitchen for staff guidance.	C 283	SEE Attached		



Angel House Family Care Homes

In response rule 10A NCAC 13.0904 (e)(3) Nutrition and food service
Therapeutic diets in a Family Care Home, in non-compliance:

As stated in the report, administrator was not aware that the supervisor in charge on duty Had discarded the diet order list that was posted for all staff to reference. This occurred When the refrigerator needed replacing. Administrator provides training annually as well As upon the hire process, on food service. The training also gives information related to Posting all diet orders. Administrator will begin on 09/01/2025, and for the next 90 days Doing weekly checks to monitor that menus and diet orders are being followed.

Administrator will continue with the annual training related to rule area of food service For all staff. This will be to maintain compliance.