STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011375	A. BUILDING: _____ B. WING _____	R 04/21/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RICHMOND HILL ASSISTED LIVING # 2	95 RICHMOND HILL 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
D 000	Initial Comments The Adult Care Licensure Section conducted an annual and follow-up survey and a complaint investigation on 04/21/26.	D 000		
D 324	10A NCAC 13F .0906 (d) Other Resident Care And Services 10A NCAC 13F .0906 Other Resident Care And Services (d) Telephone. (1) A telephone shall be available in a location providing privacy for residents to make and receive calls. (2) A pay station telephone is not acceptable for local calls; and (3) It is not the home's obligation to pay for a resident's toll calls This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to ensure a working telephone was available for use for 8 of 8 residents residing in the facility. The findings are: Observation of the facility's telephone on 04/21/26 at 11:35am revealed: -It was located on a small table in the dining room. -There was no dial tone. -There was a message on the screen of the handset of "no line". Interview with a resident on 04/21/26 at 11:18am revealed he tried to use the facility telephone, but	D 324	Admin contacted owner to have Spectrum came to work on phone line to ensure that residents are able to make calls as needed n desired. Admin will instruct staff to periodically test phone to ensure it is working +	5/1/26

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Lacy Russell — TITLE: Administrator — (X6) DATE: 5/11/26

LSB

reviewed and acknowledged 5-15-26

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D 324	Continued From page 1 it had not worked in months. Interview with another resident on 04/21/26 at 11:18am revealed he tried to use the facility telephone, but it had not worked in months. Interview with a third resident on 04/21/26 at 11:30am revealed: -The telephone did not work and it had been that way for a year. -She used another resident's cellphone if she needed to make a telephone call. -Staff were aware the telephone did not work. Interview with a fourth resident on 04/21/26 at 11:32am revealed the telephone did not work. Interview with the personal care aide on 04/21/25 at 11:20am revealed: -The telephone did not work . -She told the Administrator but nothing was done about it. Interview with the medication aide on 04/21/25 at 11:20am revealed she did not know that the telephone did not work. Interview with the Resident Care Coordinator (RCC) on 04/21/26 at 11:33am revealed: -No one told her the telephone did not work. -She checked the telephone 1 or 2 months ago and it worked at that time. Interview with the Administrator on 04/21/26 at 12:04pm revealed she did not know the telephone in the facility was not working until yesterday (04/20/26).	D 324	and if not working, report to Admin immediately so service ticket can be requested.	

Division of Health Service Regulation

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D 433	Continued From page 2	D 433		
D 433	10A NCAC 13F .1201(a) Resident Records 10A NCAC 13F .1201Resident Records (a) The following shall be maintained on each resident in an orderly manner in the resident's record in the adult care home and made available for review by representatives of the Division of Health Service Regulation and county departments of social services: (1) FL-2 or MR-2 forms and the patient transfer form or hospital discharge summary, when applicable; (2) Resident Register; (3) receipt for the following as required in Rule .0704 of this Subchapter: (A) contract for services, accommodations and rates; (B) house rules as specified in Rule .0704(a)(2) of this Subchapter; (C) Declaration of Residents' Rights (G.S. 131D-21); (D) the home's grievance procedures; and (E) civil rights statement; (4) resident assessment and care plan; (5) contacts with the resident's physician, physician service or other licensed health professional as required in Rule .0902 of this Subchapter; (6) orders or written treatments or procedures from a physician or other licensed health professional and their implementation; (7) documentation of immunizations against influenza virus and pneumococcal disease according to G.S. 131D-9 or the reason the resident did not receive the immunizations based on this law; and (8) the Adult Care Home Notice of Discharge and Adult Care Home Hearing Request Form if the resident is being or has been discharged.	D 433	Admin will upload all required documents to EMAR System so they can be electronically reviewed as needed or requested. Original documents will remain in office building but copies will be compiled in a binder to keep in facility.	5/14/26

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D 433	Continued From page 3 When a resident leaves the facility for a medical evaluation, records necessary for that medical evaluation such as Subparagraphs (1), (4), (5), (6) and (7) above may be sent with the resident. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to maintain resident records in the adult care home that were readily available for review for 3 of 3 sampled residents (Resident #1, #2, and #3). The findings are: Observation of the facility on 04/21/26 at 9:00am revealed there were no resident records in the facility. Interview with the medication aide (MA) on 04/21/26 at 9:50am revealed: -The resident records were in the manager's office which was in another building. -A copy of each resident's care plan, FL2, diet orders, and medication list were in a binder stored in the kitchen. -She knew to ask the RCC or Administrator if she needed something from the record. Interview with the Resident Care Coordinator on 04/21/26 at 9:34am revealed: -The resident records were in the manager's office which was in another building. -A copy of each resident's care plan, FL2, diet orders, and medication list were in a binder stored in the kitchen. Interview with the Administrator on 04/21/26 at	D 433		

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D 433	Continued From page 4 10:35am revealed: -The Owner of the facility did not want the residents' records in the facility. -A partial record was kept in the facility for the staff to use.	D 433		