PRINTED: 03/14/2022 FORM APPROVED

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: B. WING HAL011133 03/02/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 30 DALEA DRIVE **CHASE SAMARITAN ASSISTED LIVING** ASHEVILLE, NC 28805 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) D 000 Initial Comments D 000 The Adult Care Licensure Section and the **Buncombe County Department of Social Services** conducted an annual survey and complaint investigation on 03/01/22 - 03/02/22. The complaint investigation was initiated by the Buncombe County Department of Social Services on 02/25/22. D 074 10A NCAC 13F .0306(a)(1) Housekeeping And D 074 Facility to ensure that walls, ceilings **Furnishings** and floors and floor coverings kept clean and in good repair. Leak from 10A NCAC 13F .0306 Housekeeping And tollet between rooms 101/103 **Furnishings** repaired and toffer reset by Linterett (a) Adult care homes shall: weerend if a 12-31 in Toretheeth eth. (1) have walls, ceilings, and floors or floor rooms 109-111 reser and repaired by coverings kept clean and in good repair; contractor weekend of 3/12-3/13. Cailing in bathroom between 211/2/3 cleaned with bleach and recainted by contractor 3.6/22. Facility Special instructed contractor to on vey the remount includes in the facility and make repairs. Facility This Rule is not met as evidenced by: Director observed all cellings Based on observations and interviews the facility failed to ensure the floors and ceilings were kept throughout the building indiather problem areas identified. clean and in good repair as evidenced by the ceiling in the shared resident bathroom of rooms #211 and #213 with a black looking fuzzy substance, and two toilets, loose and heavily soiled with leaking water pooling in the floor of two shared bathrooms, #101 and #103, and rooms #109 and #111. The findings are: Observation of the shared resident bathroom for rooms #101 and #103 on 03/01/22 at 9:00am revealed: -Water was leaking from the toilet on the Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Almenistrator

Reviewed and acknowledged 3/16/22 placheco

STATE FORM

3-14-22

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: B. WING HAL011133 03/02/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 30 DALEA DRIVE CHASE SAMARITAN ASSISTED LIVING ASHEVILLE, NC 28805 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) D 074 Continued From page 1 D 074 bathroom floor. -The water covered the floor from the middle of the base of the toilet to behind the toilet along the full length of the back wall. -The toilet was loose to the touch and the screws at the base of the toilet appeared broken. Observation of the shared resident bathroom for rooms #109 and #111 on 03/01/22 at 9:08am revealed: -The toilet was not affixed to the floor and was moveable upon touch. -The bathroom floor from the sink to the back wall behind the toilet was heavily soiled with brown and black grim and matter. -The seal around the toilet broken. -There was a watery, black substance extending out an inch to 1.5 inches from the seal. -There was dark brown fecal matter streaked down the base of the toilet. -There was a soiled, wet, black wad of toilet paper at the base of the toilet. -There was a pool of water surrounding the base of the toilet. Observation of the ceiling in the shared bathroom for rooms #211 and #213 on 03/01/22 at 9:18am revealed: -A 2 foot(ft) by 3 ft. area of the ceiling over the sink area was brown and discolored. -There was a black fuzzy looking substance approximately 4 inches by 3 inches congregated in an area closest to the wall on the ceiling. -There was multiple black areas the size of a pencil eraser throughout the 2 ft by 3 ft. area. -There were varying degrees of brown stains covering over the entire 2 ft. by 3 ft. area. Interview with a resident who shared the bathroom in rooms #101 and #103 on 03/01/22

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: _ B. WNG HAL011133 03/02/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **30 DALEA DRIVE CHASE SAMARITAN ASSISTED LIVING** ASHEVILLE, NC 28805 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5)(EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) D 074 Continued From page 2 D 074 at 9:00am revealed: -The toilet had been leaking for the past four months. -She had mentioned it to the housekeeper as they had to clean up the water daily with towels to get the water up. -She did not like having to walk in the water to use the toilet. -She mentioned it to housekeeping again last week when they were in the room cleaning. -The housekeeper said he would fix it as soon as he had a chance to. -She had to be very careful when she went to sit on the toilet as the toilet moved when she sat down -Nothing had been done to stabilize the toilet of fix the leak Interview with a second resident who shared a bathroom in rooms #211 and #213 on 03/01/22 at 9:18am revealed: -He was concerned there was black "mold" growing on the ceiling of the bathroom and the toilet was not affixed to the floor. -The ceiling had been that way a long time but he could not remember how long. -He had told the Maintenance Director several times but nothing had been done. -He was not sure of the last date he told maintenance but thought it had been in the past couple of weeks. The ceiling was noticeable to anyone who walked into the bathroom. Interview with a third resident who shared a bathroom in rooms #109 and #111 on 03/01/22 at 9:50am revealed: -The bathroom was just "nasty". He had to put on his shoes each time he needed to use the bathroom as of the water and grime.

Division of	of Health Service Regu	lation			FORM APPROVED
	OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE C	ONSTRUCTION	(X3) DATE SURVEY
AND PLAN (OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING:		COMPLETED
		HAL011133	B. WNG		03/02/2022
NAME OF P	ROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, STATE	E, ZIP CODE	
CHASE S.	AMARITAN ASSISTED LI	30 DALE	A DRIVE		
	AMARITAN ASSISTED E	ASHEVIL	LE, NC 28805		
(X4) ID		ATEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CORRECTIO	N (X5)
PREFIX TAG		Y MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPI	BE COMPLETE
2			I IAG	DEFICIENCY)	NATE DATE
D 074	Continued From page	3	D 074		1
			5014		
9		fixed to the floor would move			
	if you went to sit down	n on it. eaking for so long that the			
	area around the base	of the toilet had turned			
	black.	of the tollet flad turlled			
		cutive Director (ED) and the			
		ning had been done to fix the	1		52 52
	problem.	and the poor do no no no no			25
	-He had mentioned it	back last summer and had			
		the housekeeper two weeks			
	ago but was told he h	ad not had time to get to it.			1
)					:: :::
		intenance Director on			\ "
	03/01/22 at 3:20pm re				
		for general maintenance,			8
ł	their medical appointr	nd transporting residents to	1		
		r residents would notify him	Ĭ		1
	of things that needed	to be fixed in the facility.			
		ing while he was providing			
	housekeeping service	es or out in the facility he			
		s he could and had time.			i
i		ajor plumbing or electrical			
		y as those were contracted			
	out.	n in #109 and #111 needed			
	to be cleaned, resealed	CANADON CONTRACTOR DE CONTRACT			
	replaced at the botton				
		ad not had time to take care			1
	of it as he had other o				
į		in #101 and #103 needed			Ţ
į		to be replaced, 2 new bolts			8
	to secure it and caulk	ing to stop the leak.			
	-He had noticed the le				
į	bathroom.		i		1
		n in room #211-#213 had a			1
!		ne time and needed to be			i
:	painted.				İ
1	-ne was not responsit	ole to for painting in the			
	racility, the ED was re	sponsible for having it done			Ĭ.

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: _ B. WING HAL011133 03/02/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 30 DALEA DRIVE CHASE SAMARITAN ASSISTED LIVING ASHEVILLE, NC 28805 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) D 074 ¹ Continued From page 4 D 074 with the contract company. -He had not noticed the ceiling and had not informed the ED. Interview with the ED on 03/02/22 at 3:35pm revealed: -She would randomly walk through and check rooms for any environmental issues but did not keep a log of this. -She expected the Maintenance Director or any of her staff, or the residents to inform her of any issues. -She had not been notified by residents or the Maintenance Director of any environmental issues with the ceilings, broken or soiled toilets. -The facility had a company the owners contacted with for large issues to be fixed in the building related to heating and air, plumbing, painting and other issues. D 113 10A NCAC 13F .0311(d) Other Requirements D 113 10A NCAC 13F .0311 Other Requirements Facility to ensure that water temperatures (d) The hot water system shall be of such size to remain between 100-116 degrees. provide an adequate supply of hot water to the Maintenance Director turned water temperature kitchen, bathrooms, laundry, housekeeping down while surveyors were at the facility. Temperatures have remained within the safe! closets and soil utility room. The hot water zone. Temp log as follows: temperature at all fixtures used by residents shall 206/208-114.4 be maintained at a minimum of 100 degrees F 210/212-111.9 (38 degrees C) and shall not exceed 116 degrees Facility Director to check random water F (46.7 degrees C). This rule applies to new and temperatures on each hall monthly. existing facilities. This Rule is not met as evidenced by: Based on observations, record reviews, and 3/14/22 interviews, the facility failed to ensure water temperatures were maintained between 100 and

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Division	of Health Service Regu	lation			FORM APPROVED
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AND PLAN	OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING:		(X3) DATE SURVEY COMPLETED
					Technologies Contactions of the
	_	HAL011133	B. WING		
NAME OF D	ROVIDER OR SUPPLIER				03/02/2022
INAMIC OF P	ROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, STATE	, ZIP CODE	
CHASE S	AMARITAN ASSISTED LI	VING 30 DALE	A DRIVE		
			LLE, NC 28805		
(X4) ID PREFIX	SUMMARY ST. (EACH DEFICIENC	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL	ID	PROVIDER'S PLAN OF CORRECTION	N (X5)
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		-		DEFICIENCY)	NAIL DAIL
D 113	Continued From page	6	D 113		
					ļ _a
	3:02pm revealed:	resident on 03/01/22 at			
		room sink would get very	-00		:
	hot.	moon sink would get very			
	-He would wash his h	ands in cold water to avoid			
	getting burned.				*
	Interview with two per	sonal care aides (PCA) on			I
į	not complained about	revealed the residents had			¥
į	the bathrooms.	the water being too hot in			j
į	the bathlooms.		i		*
31	Interview with the Mai	ntenance Director (MD) on			
]	03/01/22 at 10:30am i	evealed:			2
	-He did not know the	procedure for checking			
	water temperatures in	the facility.			
1	doing random water to	itive Director (ED) had been			
ļ	doing random water to	d the water temperatures.			
	THE HEAT HOTEL OFFICERE	d the water temperatures.	i l		
	Review of the facility's	hot water log revealed:			F
į	-On 01/05/22 one hot	water temperature check in			20
į	room 101 was 106 F.				li L
1	-On 02/02/22 one hot	water temperature check in			6
	room 113 was 108 FThere were no docum	lanted but water			
·	temperature checks or	the 200 hall bathrooms.			1
į,		The 250 Hall Ball Booking.			
i)		on 03/01/22 at 10:33am			
10	revealed:				
Į.	-She did monthly wate	r temperature checks in	1		
	random bathrooms.				
j	2022 on the 100 hall.	en completed in February			
	on sho roo nail.				ii.
ļ	Interview with the ED of	on 03/01/22 at 2:00pm	1		
	revealed:	*			# 87
1	-On 12/30/21 the resid	ents had complained to the			
		s family that the water was			1
	too cold.				1

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activities.

-It was boring and depressing to sit around all day

-They would participate if the facility offered

-The only thing they could do was sleep, walk outside and go to the dining room to eat. -There had not been anything on the activity

-There was not anyone assigned to do activities

-They would participate if the facility offered any

and have nothing to do.

calendar in months.

that they were aware of.

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(PCA) to assist the residents with activities.

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March 2022

			101 TO TO]		
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		-	2	ന	4	rð.
9	2	8	o	10	11	12
Family Day	COVID OUTE	REAK- NO GROUP A	ACTIVITIES PER HEA	COVID OUTBREAK- NO GROUP ACTIVITIES PER HEALTH DEPT UNTIL OUTBREAK STATUS LIFTED	TBREAK STATUS LI	FTED
13	14	15	16	17	18	19
Family Day	TV Game Night 7p-8p	Bingo 1p-3p	Coffee Social 10a-1130a	St Patricks Day Party 1p-3p	Shopping 1p-4p	Movie Night and Popcorn
				430p-630p- TBS	DUKE Game 7p-10p-CBS	8p-11p Madea BET
20	21	22	23	24	25	26
Family Day	March Madness 2nd Round- ABC 1p-5p TV Game Night 7p-8p	Spring Crafts 1p-3p	Coffee Social 10a-1130a Music with Mom 1p-3p	Bingo 1p-3p	Shopping 1p-4p	Movie Night and Popcorn 730p-10p Bad Boys- ScyFy
27	28	29	30	31		
Family Day	March Madness 3rd Round- CBS 1p-5p TV Game Night 7p-8p	Self Portrait 1p-3p	Coffee Social 10a-1130a Music with Mom 1p-3p	Bingo 1p-3p		_

Courtesy of WinCalendar.com

More Calendars, Apr 2022, May 2022, 2022