STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL085003	A. BUILDING: **01** B. WING _____	**03/22/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MOUNTAIN VALLEY LIVING CENTER	**1135 TAYLOR ROAD** **WESTFIELD, NC 27053**

(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 Construction Section Biennial Survey report by Frank Strickland on 03/22/2018: This facility was licensed on 01/01/2007 as a Home for the Aged serving 26 residents. Therefore, this facility must meet the 2005 Rules for the Licensing of Adult Care Homes and the 2006 North Carolina State Building Code-Section 407 Institutional Occupancy - Group I-2. Deficiencies have been cited and a Plan of Correction is required.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by: 1-Based on observation, this facility has not meet the code requirements in effect at the time of it's construction.	C 101		

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C 101	Continued From page 1 Findings on 03/22/2018: There is not an illuminated exit sign at the Basement exterior exit. 2-Based on observation, this facility has not meet the code requirements in effect at the time of it's construction. Findings on 03/22/2018: There is not any emergency illumination for the Basement exit door pathway.	C 101		
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 observation, this facility has not maintained current sanitation, fire and building safety inspection reports. Findings on 03/22/2018: The following current reports were not on site for review: (a) Building Sanitation (b) Kitchen Sanitation (c) Fire Sprinkler System (d) Fire Alarm System	C 111		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189		

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C 189	Continued From page 2 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, this facility has not maintained the fire-safety equipment in a safe and operating condition. Findings on 03/22/2018: The emergency lights located at the following locations do not provide emergency illumination: (a) Dining Room (b) Salon Room 2-Based on observation, this facility has not maintained the electrical equipment in a safe and operating condition. Findings on 03/22/2018: The 2" conduits mounted to the telephone board located in the Basement are not properly fire protected. 3-Based on observation, this facility has not maintained the fire-safety equipment in a safe and operating condition. Findings on 03/22/2018: The Kitchen door leading from the Hall was held open by a chair and the Kitchen door leading into the Dining Room was held open by a 5 gallon bucket with cleaning fluid.	C 189		

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