

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL011264</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/23/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ANGEL HOUSE IV</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>60-B HORNOT CIRCLE ASHEVILLE, NC 28806</b>
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(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	<p>Initial Comments</p> <p>Report by Scott Greenwood</p> <p>DHSR Construction Section conducted a Biennial Survey on August 23, 2023 from 10:25 AM to 11:30 AM at the above referenced facility. DHSR records indicate the home was first licensed on May 13, 1992 as a Family Care Home for six (6) Residents with no more than three(3) that can be non-ambulatory (who are unable to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 1991 "Rules for Family Care Homes Minimum Standards and Regulations," applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 North Carolina State Building Code - Section 514.2, - Residential Care Facilities.</p> <p>1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with on-site staff during the exit interview.</p> <p>2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.</p> <p>The cited deficiencies are as follows.</p>	C 000		
C 169	<p>Fire Safety-Smoke Detectors</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (b) The building shall be provided with smoke detectors as required by the North Carolina State</p>	C 169		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 169	<p>Continued From page 1</p> <p>Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup. Note: Smoke detectors are required to be interconnected by this Rule. The application of the Rule permits the heat detectors to be interconnected with smoke detectors, but does not require it.</p> <p>This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the egress hallway smoke detectors were not interconnected. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to interconnect the egress hallway smoke detectors.</p>	C 169		
C 174	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes.</p> <p>This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the hot water tank electrical wire connection strain relief clamps were missing. This is not compliant with the rule for routine interior maintenance and could potentially cause a shock hazard. Take the necessary steps to correct this</p>	C 174		

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C 174	<p>Continued From page 2</p> <p>deficiency.</p> <p>2. At the time of the survey it was observed that there was debris under the rear deck. This is not compliant with the rule for routine exterior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>3. At the time of the survey it was observed that there was cob web buildup at the exterior siding and trim boards. This is not compliant with the rule for routine exterior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>4. At the time of the survey it was observed that there was lint buildup at the exterior clothes dryer vent. This is not compliant with the rule for routine exterior maintenance and could potentially cause a fire hazard do to lint buildup in the dryer duct. Take the necessary steps to correct this deficiency.</p>	C 174		