



ABUSE & NEGLECT

ASSISTANCE

CHILD SUPPORT

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FOSTER CARE & ADOPTION

LICENSING

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TerraBella Pheasant Ridge

4435 Pheasant Ridge
Roanoke, VA 24014
(540) 725-1120

Current Inspector: Jennifer Stokes (540) 589-5216

Inspection Date: Aug. 26, 2022

Complaint Related: No

Areas Reviewed:

22VAC40-73 GENERAL PROVISIONS
 22VAC40-73 ADMINISTRATION AND ADMINISTRATIVE SERVICES
 22VAC40-73 PERSONNEL
 22VAC40-73 STAFFING AND SUPERVISION
 22VAC40-73 ADMISSION, RETENTION AND DISCHARGE OF RESIDENTS
 22VAC40-73 RESIDENT CARE AND RELATED SERVICES
 22VAC40-73 RESIDENT ACCOMMODATIONS AND RELATED PROVISIONS
 22VAC40-73 BUILDINGS AND GROUND
 22VAC40-73 EMERGENCY PREPAREDNESS
 22VAC40-73 ADDITIONAL REQUIREMENTS FOR FACILITIES THAT CARE FOR ADULTS WITH SERIOUS COGNITIVE IMPAIRMENTS
 ARTICLE 1 ? SUBJECTIVITY
 32.1 REPORTED BY PERSONS OTHER THAN PHYSICIANS
 63.2 GENERAL PROVISIONS
 63.2 PROTECTION OF ADULTS AND REPORTING
 63.2 LICENSURE AND REGISTRATION PROCEDURES
 63.2 FACILITIES AND PROGRAMS
 22VAC40-90 BACKGROUND CHECKS FOR ASSISTED LIVING FACILITIES
 22VAC40-90 THE SWORN STATEMENT OR AFFIRMATION
 22VAC40-90 THE CRIMINAL HISTORY RECORD REPORT
 22VAC40-80 THE LICENSE
 22VAC40-80 THE LICENSING PROCESS
 22VAC40-80 COMPLAINT INVESTIGATION
 22VAC40-80 SANCTIONS

Technical Assistance:

Facility management was reminded that when the new license was issued, they would need the new company to hire the staff, including new background checks and orientation, and to have new contracts (resident agreements) signed.

Comments:

Type of inspection: Initial
 Date(s) of inspection and time the licensing inspector was on-site at the facility for each day of the inspection: 8/26/2022 9:40 am to 3:15 pm, with file review completed off site.

The Acknowledgement of Inspection form was signed and left at the facility for each date of the inspection.

Number of residents present at the facility at the beginning of the inspection: 65
 The licensing inspector completed a tour of the physical plant that included the building and grounds of the facility.
 Number of staff records reviewed: 9
 Number of interviews conducted with staff: 4

An exit meeting will be conducted to review the inspection findings.

The evidence gathered during the initial inspection determined non-compliance with applicable standard(s) or law, and violation(s) were documented on the violation notice issued to the facility. The applicant has the opportunity to submit a plan of correction to indicate how the cited violation(s) will be addressed in order to maintain future compliance with applicable standard(s) or law.

If the applicant wishes to provide a plan of correction: (i) type the plan on a separate Word document, (ii) identify the standard violation number being addressed, (iii) include the date the violation will be corrected, (iv) do not include any names or confidential information, and

number being addressed, (iii) include the date the violation will be corrected, (iv) do not include any names or confidential information, and (v) return to the licensing inspector by email within five (5) business days of the exit interview.

Compliance with all applicable regulations and law shall be maintained and any areas of noncompliance must be corrected.

Within 15 calendar days of your receipt of the inspection findings (inspection summary, violation notice, and supplemental information), you may request a review and discussion of these findings with the inspector's immediate supervisor. To make a request for review and discussion, you must contact the licensing supervisor at the regional licensing office that serves your geographical area.

Regardless of whether a supervisory review has been requested, the results of the inspection will be posted to the DSS public website should the facility be issued a license to operate.

The department's inspection findings are subject to public disclosure.

Please Note: A copy of the findings of the most recent inspection are required to be posted on the premises of a licensed facility.

For more information about the VDSS Licensing Programs, please visit: www.dss.virginia.gov

Violations:

Standard #:	22VAC40-73-870-A
Description:	Based on observation, the facility failed to have the interior and exterior maintained in good condition. EVIDENCE: 1. There was a broken switchplate with a piece missing in the lower level hallway near the laundry room. 2. Wallpaper was peeling in several places in the hallways of the memory care section. 3. Outside at the kitchen exit door, the door frame had some wood damage.
Plan of Correction:	Broken switch plate replaced with new on 8/26/2022 ? The Maintenance Director or Designee will obtain 2 quotes to remove wallpaper in Memory Care and Paint by 9-16-22. Wallpaper peeling in Memory care has been glued back in place by Maintenance Director. Completion of wallpaper removal or repair by 11/30/2022 or scheduled based on availability of contractor and materials. ? The Maintenance Director or Designee will obtain quote to repair or replace damaged wood siding area by 9-16-22. Completion of repairs by 11/30/2022 or scheduled based on availability of contractor and materials.

Disclaimer:

This information is provided by the Virginia Department of Social Services, which neither endorses any facility nor guarantees that the information is complete. It should not be used as the sole source in evaluating and/or selecting a facility.