

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 515147	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/08/2025
NAME OF PROVIDER OR SUPPLIER Hidden Valley Center		STREET ADDRESS, CITY, STATE, ZIP CODE 422 23rd Street Oak Hill, WV 25901	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on the observation and staff interview the facility failed to maintain a comfortable and sanitary environment for residents. These findings had the potential to affect more than an isolated number of residents. Facility census: 74. A tour of the facility on 09/08/25 at 11:00 AM revealed the following observations:</p> <p>a) room [ROOM NUMBER]</p> <p>A brown substance was around the base of the toilet. The room had lots of white dry wall mud patches.</p> <p>b) room [ROOM NUMBER]</p> <p>Dry wall mud patches were on the walls of the room. A toilet paper roll holder was missing, and the toilet paper was sitting on top of the back of the commode.</p> <p>c) room [ROOM NUMBER]</p> <p>The ring around the base of the toilet was brown. The room had several dry wall mud patches throughout.</p> <p>The painted finish was observed coming off the handrails on the Alzheimer's/Dementia Unit.</p> <p>d) room [ROOM NUMBER]</p> <p>On 09/08/25 at 11:20 AM broken window slats were observed in the window covering</p> <p>e) room [ROOM NUMBER]</p> <p>Observation revealed no toilet paper roll holder. The toilet paper was sitting on the back of the commode.</p> <p>g) room [ROOM NUMBER]</p> <p>The was a dirty ring of caulk around the base of the toilet</p> <p>h) room [ROOM NUMBER]</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>At 11:30 AM dirt was build-up around baseboard and air conditioning unit.</p> <p>t) room [ROOM NUMBER]</p> <p>At 11:33 AM room [ROOM NUMBER] was observed to have dirt build-up around baseboard and air conditioning (AC) unit.</p> <p>u) room [ROOM NUMBER]</p> <p>At 11:40am room [ROOM NUMBER] was observed to have dirt and drywall dust at AC unit.</p> <p>v) room [ROOM NUMBER]</p> <p>At 11:41 AM room [ROOM NUMBER] had dirt on the floor around room and A/C unit was dirty.</p> <p>w) room [ROOM NUMBER]</p> <p>At 11:43 AM room [ROOM NUMBER] was observed to have dirt on the floor and food was found around bed - B.</p> <p>x) room [ROOM NUMBER]</p> <p>11:45am room [ROOM NUMBER] - Dirt on floor around baseboard.</p> <p>y) room [ROOM NUMBER]</p> <p>11:47am room [ROOM NUMBER] - Dirt build-up around baseboard and food on floor.</p> <p>z) room [ROOM NUMBER]</p> <p>11:49 AM room [ROOM NUMBER] had dirt build-up around baseboard and food on floor, and tile coming up at foot of bed - B.</p> <p>aa) room [ROOM NUMBER]</p> <p>11:52 AM room [ROOM NUMBER] - Dirt build-up around baseboard and dirt on floor.</p> <p>bb) room [ROOM NUMBER]</p> <p>11:54am room [ROOM NUMBER] - Dirt on floor, wax build-up around A/C unit.</p> <p>cc) room [ROOM NUMBER]</p> <p>11:56 AM room [ROOM NUMBER] - Dirt on floor, cobwebs in corners around room.</p> <p>dd) room [ROOM NUMBER]</p> <p>11:59 AM room [ROOM NUMBER] - Dirt on floor, food in A/C unit.</p> <p>(continued on next page)</p>

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