

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL040009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R-C 07/18/2018
NAME OF PROVIDER OR SUPPLIER SOZO FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 2757 MEWBORN CHURCH ROAD SNOW HILL, NC 28580		
(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 Report by Greg Williams DHSR Construction Section conducted a Complaint Follow-up Survey on July 18, 2018 from 10:00 AM to 10:30 AM at the above referenced facility. Not all of the previously cited deficiencies were corrected. Therefore, further action is required. The remaining deficiencies are as follows:	{C 000}		
{C 116}	Construction-Meet Sanitary Requirements SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (m) The building shall meet sanitation requirements as determined by the North Carolina Department of Environment and Natural Resources; Division of Environmental Health. This Rule is not met as evidenced by: 1). The licensure rule requires the facility to maintain a passing sanitation grade. Findings include: Observations revealed that the facility has a failing sanitation grade due to a failing septic system. Effect: This creates a potential health and safety hazard for the residents. Directive: Make all necessary repairs to the septic system and bring the facility back into compliance with all sanitation requirements. Provide the DHSR Construction Section with documentation verifying that the septic system	{C 116}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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{C 116}	Continued From page 1 has been repaired and provide a copy of a current approved sanitation report. 02/21/2018 GH The above listed deficiency still remained at the time of the follow up survey. *note; the permits have been obtained and the land has been surveyed for the septic tank repair. It was scheduled to start in January but wet conditions have prevented the work to begin. 07/18/2018 GHW. The above listed deficiency still remained at the time of the follow up survey. *note: The septic drain field repairs have been completed, awaiting final approval from the county. Provide copies of final Sanitation Approvals. * For all deficiencies listed above provide documentation of completed work in the form of photographs, receipts, invoices, etc. All deficiencies listed above were discussed with on-site staff during the exit interview.	{C 116}		