STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL011288	A. BUILDING: **01** B. WING _____	**08/30/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EVERGREEN LIVING HOME #12	**352 FAMILY RIDGE ROAD** **LEICESTER, NC 28748**

(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 Luis Padilla DHSR Construction Section conducted a Biennial Survey on August 30, 2018 from 9:00 AM to 9:50 AM at the above referenced facility. DHSR records indicate the home was first licensed on October 16, 1997 as a Family Care Home for six (6) Residents with up to three (3) non ambulatory residents (unable to respond and evacuate without physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: The 1992 Minimum Standards and Regulations for Family Care Homes, the applicable portions of the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 1996 North Carolina State Building Code - Section 419.3 - Small Residential Care facilities At the time of our visit, we cited deficiencies that require an acceptable plan of correction; all deficiencies listed below were discussed with on-site staff during the exit interview. The listed deficiencies are as follows:	C 000		
C 159	Housekeeping-Curtains, Blinds, Res. Privacy SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (9) have curtains, draperies or blinds at windows in resident use areas to provide for resident privacy; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1.) The rule requires each family care home shall	C 159		

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C 159	Continued From page 1 have curtains, draperies or blinds at windows in resident use areas to provide for resident privacy: During our visit it was observed that Bedroom #2 did not have blinds installed for privacy. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documnetation in the form of photos for all completed work.	C 159		
C 174	Building Equipment Maintained Safe, Operating 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. This Rule is not met as evidenced by: 1.) The rule requires all fire safety equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that the Fire Extinguishers for the home were not being inspected on a monthly basis by staff. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work. 2.) The rule requires all plumbing equipment in a family care home shall be maintained in a safe	C 174		

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C 174	Continued From page 2 and operating condition: During our visit it was observed that the toilet for the Staff Bathroom was loose at its base and dirty. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 174		
C 180	Building Service Equipment-Call System SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (f) Where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that it can be activated with a single action and remain on until deactivated by staff. The call system activator shall be within reach of resident lying on his bed. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1.) The rule requires where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom: During out visit it was observed that the call system for the home was not functional. This is not compliant with the rule.	C 180		

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C 180	Continued From page 3 Make arrangements to have the deficiency corrected; provide documentation in the form of invoices/receipts for all completed work.	C 180		
C 183	Outside Premises-Clean, Safe SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. This Rule is not met as evidenced by: 1.) The rule requires the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition: During our visit it was observed that the dryer exhaust duct had a build-up of lint around it. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 183		
C 118	Bedrooms-Windows T10: 42C .2205 BEDROOMS (g) Each resident bedroom must have one or more operable windows and be lighted to provide 30 foot candles of light at floor level. The window area must be equivalent to at least eight percent of the floor space. The windows must be low enough to see outdoors from the bed and chair, with a maximum 36-inch sill height. This Rule is not met as evidenced by: 1.) The rule requires each resident bedroom must	C 118		

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C 118	Continued From page 4 have one or more operable windows and be lighted to provide 30 foot candles of light at floor level: During our visit it was observed that the window for Bedroom #5 was not operating correctly. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 118		
C 138	Outside Entrances/Exits-Single Hand Motion T10: 42C .2209 OUTSIDE ENTRANCES AND EXITS (d) All exit doors locks must be easily operable, by a single hand motion, from the inside at all times without keys. This Rule is not met as evidenced by: 1.) The rule requires all exit doors locks must be easily operable, by a single hand motion, from the inside at all times without keys: During our visit it was observed that the side entrance door for the home is not single hand motion. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 138		

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C 143	Continued From page 5	C 143		
C 143	Floors T10: 42C .2211 FLOORS (a) All floors must be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs are not to be used. (c) All floors must be kept in good repair. This Rule is not met as evidenced by: 1.) The rule requires scatter or throw rugs are not to be used: During our visit it was observed that throw rugs were being utilized in the Staff Bedroom. This is not compliant with the rule. Make arrangements to have the deficiency corrected. Ensure that all throw rugs in the home are removed from site. Once completed provide documentation in the form of photos for all completed work.	C 143		