STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	fcl060154	A. BUILDING: **01** B. WING _____	**05/28/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILSON GROVE SENIOR LIVING	**7020 WILSON GROVE ROAD CHARLOTTE, NC 28227**

(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 David Hickman DHSR Construction Section conducted a Biennial Survey on May 28, 2019 from 2:45 PM to 3:45 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 12, 2018 as a Family Care Home for six (6) ambulatory Residents (able to respond and evacuate without any 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 2005 Rules 10A NCAC 13G for Family Care Homes and the applicable portions of the 2012 North Carolina Building Code - Section 425.2 Residential Care Homes. NOTES: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with onsite staff during the exit interview. 2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed. The cited deficiencies are as follows:	C 000		
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	C 174		

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C 174	Continued From page 1 operating condition. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the evacuation plans were not oriented correctly on the walls. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 2. At the time of the survey it was observed that a current sanitation report was not on site. This is not compliant with the rule. Take the necessary steps to obtain a current sanitation report and fax or email this report. 3. At the time of the survey it was observed that the fire drill log was not up to date. This is not compliant with the rule. Take the necessary steps to perform one fire drill per shift every three months and keep log updated. 4. At the time of the survey it was observed that the fire extinguishers were not being monitored on a monthly basis by the staff. This is not compliant with the rule. Take the necessary steps to have the staff perform monthly checks of the fire extinguishers and initial and date tag accordingly. 5. At the time of the survey it was observed that the air filters were clogged and dirty. This is not compliant with the rule. Take the necessary steps to replace the air filters and have them checked on a regular basis. 6. At the time of the survey it was observed that the storage in some of the closets was too high and interfering with the sprinkler head operation.	C 174		

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C 174	Continued From page 2 This is not compliant with the rule. Take the necessary steps to ensure that there is eighteen inches of clearance from the sprinkler head to any storage item. 7. At the time of the survey it was observed that there was a deadbolt lock on the exterior door at the laundry room. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 8. At the time of the survey it was observed that there was a buildup of debris behind the washing machine. This is not compliant with the rule. Take the necesaary steps to correct this deficiency. 9. At the time of the survey it was observed that the escutcheon plate for the sprinkler head in the front left bedroom was hanging loose from the ceiling. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 10. At the time of the survey it was observed that the sink in the bathroom off of the den was loose from the wall. This is not compliant with the rule. Take the necessary steps to secure the sink to the wall. 11. At the time of the survey it was observed that there was only one heat detector in the attic and due to the length of the attic, this did not provide the proper coverage. This is not compliant to the rule. Take the necessary steps to install an additional heat detector in the attic to provide the proper coverage. 12. At the time of the survey it was observed that a birds nest had been built on top of one of the front porch posts. This is not compliant with the rule. Take the necessary steps to remove the	C 174		

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C 174	Continued From page 3 birds nest. 13. At the time of the survey it was observed that the steps at the rear door to the laundry area did not have handrails on both sides of the steps. This is not compliant with the rule. Take the necessary steps to add a handrail to the steps. 14. At the time of the survey it was observed that the dryer exhaust vent discharge was clogged. This is not compliant with the rule. Take the necessary steps to clean the lint build up from the exhaust vent discharge. 15. At the time of the survey it was observed that the latch on the gate to the side ramp would not latch properly. This is not compliant with the rule. Take the necessary steps to repair or remove latch on gate. 16. At the time of the survey it was observed that the latches on the fence gate were difficult to open and would not latch back easily. This is not compliat with the rule. Take the necessary steps to repair the latches so they are easily operable. 17. At the time of the survey it was observed that the storage building door was broken and not secure. This is not compliant with the rule. Take the necessary steps to repair door and make sure it is locked. 18. At the time of the survey it appeared that at least three of the clients were non ambulatory. This is not compliant with the current license. Take the necessary action to correct this deficiency.	C 174		