

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL052004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/18/2019
NAME OF PROVIDER OR SUPPLIER MAGNOLIA COTTAGE CARE BLDG #1		STREET ADDRESS, CITY, STATE, ZIP CODE 5643 HWY 70 DOVER, NC 28526		
(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 September 18, 2019 from 9:50am until 10:40am at the above referenced facility. DHSR records indicate the home was first licensed on July 10, 2003 as a Family Care Home for six (6) Residents with up to three (3) non ambulatory residents (unable to evacuate and respond 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 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 2002 North Carolina State Building Code - Section 421.3 - Small Residential Care facilities. 1. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with on-site 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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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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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 on the walls correctly. This is not compliant with the rule. Take the necessary steps to orient the plans correctly. 2. At the time of the survey it was observed that there was a loose oxygen bottle being stored without an approved rack. This is not compliant with the rule. Take the necessary steps to store the bottle in an approved rack. 3. At the time of the survey it was observed that the doors to the bathroom at the end of the right side hallway and the back right bedroom would not latch properly. This is not compliant with the rule. Take the necessary steps to repair the door latches. 4. At the time of the survey it was observed that the emergency egress window in the back middle bedroom would not stay in the open position. This is not compliant with the rule. Take the necessary steps to repair the window so that it stays open as needed. 5. At the time of the survey it was observed that there was a multigang plug being used in the back middle bedroom. This is not compliant with the rule. Take the necessary steps to remove the plug and use an approved power strip. 6. At the time of the survey it was observed that there was a missing bulb in the middle bathroom. This is not compliant with the rule. Take the	C 174		

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C 174	Continued From page 2 necessary steps to replace the missing bulb. 7. At the time of the survey it was observed that there was no night light in the right side hallway. * Corrected at the time of the survey. No further action required.	C 174		
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. At the time of the survey it was observed that the metal fascia board covering on the left side of the house was pulling away from the house. This is not compliant with the rule. Take the necessary steps to repair the fascia board covering. 2. At the time of the survey it was observed that there was a wasp nest in one of the rear windows. This is not compliant with the rule. Take the necessary steps to remove the wasp nest.	C 183		