STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL092138	A. BUILDING: **01** B. WING _____	**12/06/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AVENDELLE ASSISTED LIVING AT WYCKFORI	**4520 DILFORD DRIVE RALEIGH, NC 27604**

(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 December 6, 2019 from 1:00 PM to 2:15 PM at the above referenced facility. DHSR records indicate the home was first licensed on June 05, 2008 as a Family Care Home for six ambulatory Residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency.) On January 01, 2014 the facility was licensed for six non-ambulatory residents (unable to evacuate and respond without any physical or verbal assistance during a fire or other emergency.) Based on this information we are requiring the home to maintain compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2012 North Carolina State Building Code - Section 425.4 - Small Non-ambulatory Care Facilities. NOTES: 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 146	Outside Entrances/Exits-Ramp(s) SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE	C 146		

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C 146	Continued From page 1 AND EXITS (c) At least one principal outside entrance/exit for the residents' use shall be at grade level or accessible by ramp with a one inch rise for each 12 inches of length of the ramp. For the purposes of this Rule, a principal outside entrance/exit is one that is most often used by residents for vehicular access. If the home has any resident that must have physical assistance with evacuation, the home shall have two outside entrances/exits at grade level or accessible by a ramp. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the facility is licensed for non-ambulatory residents, however the back entrance is missing a ramp (the front entrance is built to grade). This is not compliant with the rule. A ramp must be constructed that will meet the criteria stated above.	C 146		
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. At the time of the survey it was observed that the fire extinguishers for the home are not being inspected by staff on a monthly basis. This is not	C 174		

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C 174	Continued From page 2 compliant with the rule. 2. At the time of the survey it was observed that there was a build up of lint behind the dryer of the home. This is not compliant with the rule. 3. At the time of the survey it was observed that the toilet in the master bathroom was loose at its base. This is not compliant with the rule. 4. At the time of the survey it was observed that the receptacle to the left of the kitchen sink was embedded into the wall. This is not compliant with the rule. 5. At the time of the survey it was observed that the receptacle covers in the kitchen were damaged and needed to be replaced. This deficiency has been corrected on site, take measures to ensure against re-occurrence.	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 window for Bedroom #4 was difficult to access, impeding the residents path of emergency egress. This is not compliant with the rule. 2. At the time of the survey it was observed that the front patio was not at grade with the surrounding grassy area, creating a trip hazard.	C 183		

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C 183	Continued From page 3 This is not compliant with the rule.	C 183		
C 911	G.S 131D 21(1) Declaration of Resident's Rights G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: (1) To be treated with respect, consideration, dignity, and full recognition of his or her individuality and right to privacy. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that there was a video camera that was being used in Bedroom #3, this device was connected to a monitor located in the kitchen of the home. This is not compliant with the rule.	C 911		