STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL067022	A. BUILDING: **01** B. WING _____	**04/23/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE COTTAGES AT SWANSBORO- COTTAGE I	**101 PELICAN CIRCLE SWANSBORO, NC 28584**

(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 Kelly Myers DHSR Construction Section conducted a Biennial Survey on April 23, 2024 from 9:00AM to 10:00 AM at the above referenced facility. DHSR records indicate the home was first licensed on May 14, 2018 as a Family Care Home for six (6) non-ambulatory residents (who may not be 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 425.4 - 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 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 bathroom door in bedroom #3 would not latch. This is not compliant with the rule. Take the necessary steps to adjust the door so that it will latch. 2. At the time of the survey it was observed that there was a burnt bulb in the bath vanity light in bedroom #4. This is not compliant with the rule. Take the necessary steps to replace the burnt bulb. 3. At the time of the survey it was observed that the toilet paper holder was missing one side of the holder, and the bath door would not latch. This is not compliant with the rule. Take the necessary steps, install the toilet paper holder and adjust the door so that it will latch. 4. At the time of the survey it was observed that the toilet was loose at the base in the hall half bath. This is not compliant with the rule. Take the necessary steps to secure the toilet at the base.	C 174		