STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL-092316	A. BUILDING: **01** B. WING _____	**04/23/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE RESERVE AT MILLS FARM VILLA #1	**2000 MILLS CHASE LOOP APEX, NC 27523**

(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 Jonathan Gamsey DHSR Construction Section conducted a Biennial Survey on April 23, 2024 from 07:55 AM to 8:35 PM at the above referenced facility. DHSR records indicate the home was first licensed on September 28, 2020 as a Family Care Home for six (6) non-ambulatory residents (unable to evacuate and respond 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 2005 Rules 10A NCAC 13G for Family Care Homes, and the applicable portions of the 2012 North Carolina State Building Code - Group I-2 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. There were previous deficiencies that were not closed out from an open biennial survey, these deficiencies were brought forward from previous survey. 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	C 174		

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C 174	Continued From page 1 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 in the staff office, the fire sprinkler escutcheon plate dropped down from the fire-resistance-rated ceiling exposing an opening that allowed the spread of smoke and heat. This is not compliant with the rule. Take the necessary steps to ensure that the sprinkler head and escutcheon plate are working as intended. It is recommended to utilize a certified professional to set the sprinkler head and escutcheon plate back in their original state. 2.) At the time of the survey, it was observed that the FACP showed a total com fault. This is not compliant with the rule. Take the necessary steps to repair and send documentation to DHSR. 3.) At the time of the survey, it was observed in bedroom #6 in the closet. An oxygen tank was not properly stored. This is not compliant with the rule. Take the necessary steps to properly store oxygen tanks in the facility. 4.) At the time of the survey, it was observed that the courtyard gate did not open with ease. This could potentially impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair the gate to ensure proper access in a time of need.	C 174	1. Makson, fire alarm company adjusted sprinkler head so escutcheon is covering opening. Resolved on 5/21/2024 2. I called our fire alarm company, Makson to come out and check the panel. The tech determined the panel had a faulty board and the panel was replaced. It was tested and verified that signals were sent and received. All systems are normal. Resolved on 5/17/2024 3. Oxygen tank was removed and an approved storage container will be obtained for further use. 4. We are adding a cable and turnbuckle to courtyard gate as well as adjusting hinges. Will be completed by 5/24/2024	5/21/2024 5/17/2024 5/21/2024