STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL068036	A. BUILDING: **01** B. WING _____	R **01/08/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIVEWELL ASSISTED LIVING	**6720 PAULINE DRIVE CHAPEL HILL, NC 27514**

(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 Follow up on January 8, 2024 from 11:30 AM to 1:31 PM at the above referenced facility. DHSR records indicate the home was first licensed on May 10, 2011 as a Family Care Home for six (6) ambulatory Residents (able 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 2005 Rules 10A NCAC 13G for Family Care Homes and the 2006 North Carolina State Building Code - Building Code - Section 425.4 - 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 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 105	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable	C 105		

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C 105	Continued From page 1 requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars ($380.00). (b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that a closet was missing a sprinkler head in the facility. This is not compliant with the rule. Per 428.4 Automatic Sprinkler System States " The building shall be sprinklered with a wet pipe system in accordance with NFPA 13D with a 30-minute water supply including bathrooms, toilets, closets, pantries, storage and utility spaces. The sprinkler system shall be monitored in accordance with Section 903.4 (Section 903.4, Exception 1 is not applicable in this occupancy.) " Take the necessary steps to ensure all areas in the facility are sprinkled.	C 105	I think you are referring to the small bathroom in bedroom 4.	Complete
{C 174}	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE	{C 174}		

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{C 174}	Continued From page 2 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 old basketball court does not have smoke detectors. This is not compliant with the rule. Take the necessary steps to follow up with the local fire marshal for verification if the area needs to be monitored. 2.) At the time of the survey it was observed that in the closet next to bedroom #4 a sprinkler head is not installed. This is not compliant with the rule. Take the necessary steps to hire a professional to install a sprinkler head in the closet to ensure the safety of residents and staff. *It was communicated during the survey that staff is going to bring the ceiling flush with the adjacent ceiling so the spray pattern is not affected. 3.) At the time of the survey, it was observed that an additional heat detector needs to be installed in the upper compartment of the attic. This is not compliant with the rule. Take the necessary steps to install the heat detector in the upper compartment of the attic centrally localized 4.) At the time of the survey, it was observed that the right side porch connected to the staff bedroom post is no longer sporting the deck as intended. This is not compliant with the rule. Take the necessary steps to properly to the beams to ensure the safety of the staff and residents.	{C 174}	Received formal communication from the fire marshal that the court acceptable as is. This heat detector is located and operable in a ceiling crawl space that was not identified or inspected at the time inspection. This has been repairs	April 9,24 2/12/24 2/12/24 2/12/24

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{C 174}	Continued From page 3	{C 174}		
	5.) At the time of the survey, it was observed the right side porch connected to the staff bedrooms is in a state of decay. This is not compliant with the rule. Take the necessary steps to repair and or replace boards.		This has been repaired	2/12/24
	6.) At the time of the survey, it was observed that the upstairs bathroom had an open socket. This could potentially lead to electrical shock. This is not compliant with the rule. Take the necessary steps to ensure all open sockets have a bulb in them.		Bulb installed	2/12/24
	7.) At the time of the survey, it was observed that the upstairs closet had an open socket. This could potentially lead to electrical shock. This is not compliant with the rule. Take the necessary steps to ensure all open sockets have a bulb in them.		bulb installed	
	8.) At the time of the survey, in the office upstairs cover plates are missing on the light socket and an empty outlet box. This is not compliant with the rule. Take the necessary steps to ensure cover plates are installed.		Socket cover installed, plug installed in open box	2/12/24
	9.) At the time of the survey, it was observed that extension cords are in use in the right side staff bedroom. This is not compliant with the rule. Take the necessary steps to remove all extension cords and utilize surge protectors.		Extension cords removed	2/12/24
	10.) At the time of the survey, it was observed that multiple space heaters were in the garage. This is not compliant with the rule. Take the necessary steps to remove all space heaters from the facility.		Space heaters removed	2/12/24
	11.) At the time of the survey, it was observed			

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{C 174}	Continued From page 4 that the breaker panel in the garage was blocked by a storage fixture. This is not compliant with the rule. Take the necessary steps to ensure all breaker panels have 36 inches of clearance around them.	{C 174}	Breaker panel have the necessary clearance	2/12/24
	12.) At the time of the survey, it was observed that next to the storage shed in the rear of the facility was a pile of mattresses and wood. This could potentially be a harbinger of pests. This is not compliant with the rule. Take the necessary steps to remove debris from the yard.		Trash removed	2/12/24
	13.) At the time of the survey, it was observed that a propane tank was left unsecured from the grill. This is not compliant with the rule. Take the necessary steps to secure the propane tank to the grill and or put it in a storage shed that is secured.		Propane tank removed	2/12/24
	14.) At the time of the survey, it was observed that the water heater in the garage was propane. It is requested that a single-station carbon dioxide detector be installed to protect the residents and staff.		CO2 detector installed	2/12/24