

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL045102	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/25/2024
NAME OF PROVIDER OR SUPPLIER SOUNDVIEW FAMILY CARE HOME UNIT N		STREET ADDRESS, CITY, STATE, ZIP CODE 15 EAST MONET COURT FLAT ROCK, NC 28731		
(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 September 25, 2024 from 09:30 AM until 10:00 AM at the above referenced facility. DHSR records indicate the home was first licensed on October 09, 1998 as a Family Care Home for six (6) Residents with up to three (3) non ambulatory residents (unable 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 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 1996 North Carolina State Building Code - Section 419.3 - Small Residential 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 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and	C 117		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 117	Continued From page 1 fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that a current fire and sanitation report was not on site. This is not compliant with the rule. Take the necessary steps to provide documentation that a fire and sanitation report was requested and or provide an up-to-date sanitation and fire report.	C 117		
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 staff's bathroom mechanical ventilation was not working as intended. This is not compliant with the rule. Take the necessary steps to repair and or replace components to work as intended. 2.) At the time of the survey, it was observed that the ceiling-mounted fan as soon as you enter the front door is at 77 inches above the finished floor , Ceiling mounted electrical fixtures shall be a minimum of 80 inches above the finished floor unless mounted over a barrier that prevents occupants from traveling under the fixture. This is not compliant with the rule. Take the necessary	C 174		

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C 174	Continued From page 2 steps to alter said height of 80 inches and or replace said fixture. 3.) At the time of the survey, it was observed that the front fascia board in multiple locations was separating from the facility. This is not compliant with the rule. Take the necessary steps to fasten it as it was designed to be.	C 174		