STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL051073	A. BUILDING: **01** B. WING _____	**03/27/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE ENCLAVE AT EAGLE POINT	**118 EAGLE POINTE LN CLAYTON, NC 27520**

(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 March 27, 2025 from 11:00 Am to 11:40 AM at the above referenced facility. DHSR records indicate the home was first licensed on July 17, 2020 as a Family Care Home for six (6) non ambulatory Residents (who are not able 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 2018 North Carolina State Building Code - Section 428.4 - Small Non-Ambulatory 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 353	10A NCAC 13G .1006(b) Medication Storage 10A NCAC 13G .1006 Medication Storage (b) All prescription and non-prescription medications stored by the facility, including those requiring refrigeration, shall be maintained in a	C 353		

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C 353	Continued From page 1 safe manner under locked security except when under the immediate or direct physical supervision of staff in charge of medication administration. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the medicine closet was not locked.. This is not compliant with the rule. Take the necessary steps to ensure that the medicine closet is locked when not in use.	C 353		
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that at the end of the ramp at the rear of the facility had a drop off. This is not compliant with the rule. Take the necessary steps to install handrails or build the grade up. 2.)At the time of the survey, it was observed at the rear porch that the handrail is no longer properly secured. This is not compliant with the rule. Take the necessary steps to repair or replace components as needed.	C 149		
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT	C 174		

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C 174	Continued From page 2 (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 sprinkler head tool was not in the riser room. This is not compliant with the rule. Take the necessary steps to locate or replace the sprinkler head tool and keep in riser room. 2.) At the time of the survey, it was observed that the facility had multiple residents on oxygen tanks but did not have the correct signage up. This is not compliant with the rule. Take the necessary steps to put oxygen in use signage up. -Corrected at the time of the survey 3.) At the time of the survey, it was observed that bedroom #4 had an attached bathroom with a closet that had a light fixture missing a globe. This is not compliant with the rule. Take the necessary steps to replace the globe with the light fixture.	C 174		