| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | HAL001172 | A. BUILDING: 01<br>B. WING _____ | 03/26/2025 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| A VISION COME TRUE | 220 HATCH STREET<br>BURLINGTON, NC 27217 |

| (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 |
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| C 000 | Initial Comments<br><br>Report of a Construction Section Biennial Survey by Suzanna Fay conducted on March 26, 2025.<br><br>This facility was first licensed as a Home for the Aged serving 12 residents on April 29, 2003. Therefore, this facility must meet the 1996 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 2002 North Carolina State Building Code Section 407-Institutional Occupancy, Group I-2.<br><br>Deficiencies have been cited and a Plan of Correction is required. | C 000 | | |
| C 160 | Outside Premises-Clean, Safe<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0305 PHYSICAL ENVIRONMENT<br>(m) The requirements for outside premises are:<br>(1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition;<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the outside premises were not maintained in a clean condition.<br><br>Findings on March 26, 2025:<br>a. Front Porch - a section of the porch ceiling has mildew, cracks and some of the trim near the door is rotting. | C 160 | The administrator is responsible for ensure that the outside premises are maintained in clean and safe conditions. The front porch has been repaired and painted; all cracks, mildew and rotting trim has been removed; all repairs were completed on 03/27/25.<br><br>The administrator will monitor the grounds of the facility and have maintenance to ensure that all areas are aways in clean/safe standings. This monitoring will be done monthly. The administrator will have staff to perform weekly checks and add to the daily operations procedure. | 03/27/2025 |
| C 166 | Housekeeping-Maintained Free of Hazards<br><br>SECTION .0300 - PHYSICAL PLANT | C 166 | | |



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Tammie Staton | Administrator | 04/12/2025

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| C 166 | Continued From page 1<br>10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS<br>(a) Adult care homes shall:<br>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;<br>(e) This Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation the facility is not maintained free from hazards. If the code required clearance of 36" in front of electrical breaker panels is not maintained it could delay timely operation of the breakers in an emergency situation.<br><br>Findings on March 26, 2025:<br>a. Electrical Room off of the Office - a medicine cart was stored in front of an electrical panel. This was corrected at the time of survey. | C 166 | The administrator is responsible for ensuring that facility is free from hazards and the clearance of 36” from electrical breaker is maintained; The medicine cart was moved to a location that allows compliance with state guidelines; Correction was made at the time of survey.<br><br>The administrator will monitor and ensure that the facility is clear of all hazards and will monitor monthly. The administrator will have staff to perform weekly checks and add to the daily operations procedure. | 03/26/2025 |
| C 189 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Based on observation the facility did not | C 189 | | |

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| C 189 | Continued From page 2<br><br>maintain electrical emergency/safety lighting equipment in safe operating condition. Occupants of the facility could be affected if the signs indicating exit paths could not be seen in the event of an emergency evacuation.<br><br>Findings on March 26, 2025:<br>a. The exit/emergency light at the front door did not illuminate on test.<br>b. The exit/emergency light at the Dining Room exit is not illuminated.<br>c. The exit sign over the cross corridor doors, Dining Room side, did not illuminate on test.<br><br>2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. The occupants in the smoke compartment could be affected if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin.<br><br>Findings on March 26, 2025:<br>a. The right hand door of the cross corridor doors is not latching when released by the fire alarm. | C 189 | 1. The administrator is responsible for ensuring that all electrical emergency/safety lighting equipment is in safe and operating condition; All findings has been corrected:<br><br>A. The exit/emergency light at the front door was replaced with a new one.<br>B. The exit/emergency light at the dining room was replaced with a new one.<br>C. The exit sign over the cross-corridor doors was replaced with a new one.<br>All lights were replaced by an electrician.<br><br>2. The administrator is responsible for ensuring that the cross-corridor doors are latching when released by Fire Alarm. The right-hand door was adjusted and closes properly when released. This repair was made on 03/27/2025.<br>The administrator will be do monthly checks to ensure that doors are opening properly. The administrator will have staff to perform weekly checks and add to the daily operations procedure. | 3/27/2025<br><br>3/27/2025 |
| C 199 | Exhaust Ventilation<br><br>SECTION .0300 - PHYSICAL PLANT<br>10A NCAC 13F .0311 OTHER REQUIREMENTS<br>(g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces:<br>(1) soiled linen storage;<br>(2) soil utility room;<br>(3) bathrooms and toilet rooms; | C 199 | | |

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| C 199 | Continued From page 3<br>(4) housekeeping closets; and<br>(5) laundry area.<br>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the buildup humidity that can cause mildew and slick areas and prevents the dissipation of odors.<br><br>Findings on March 26, 2025:<br>a. Laundry - the ventilation system did not appear to be working at the time of survey.<br>b. Bathroom #3 - the exhaust fan was not working. | C 199 | The administrator will ensure that the exhaust ventilation fan is working properly.<br>a. The laundry room exhaust was replaced by with a new fan.<br>b. Bathroom #3 exhaust was replaced with a new fan.<br>Both areas were repair and are working correctly. The administrator is responsible for monitoring and will also have staff to perform daily checks to ensure that all exhausts are working correctly. The administrator also added this process to the daily operations manual. | 03/27/2025 |