STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL011225	A. BUILDING: **01** B. WING _____	**05/01/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALVERTA BOLICK HOME	**80 BAKER AVENUE ASHEVILLE, NC 28806**

(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 Kelly Myers DHSR Construction Section conducted a Biennial Survey on May 1, 2025, from 12:25 PM to 1:20 PM at the above referenced facility. DHSR records indicate the home was first licensed on September 21, 2006 as a Family Care Home for six (6) residents with up to three (3) being non-ambulatory (Un-able to respond and evacuate 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 Licensure Rules 10A NCAC 13G for Family Care Homes, the applicable portions of the 2006 NC State Building Code-Section 421.3-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 onsite 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 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 the above-the-range microwave light bulb was not working. This is not compliant with the rule. Take the necessary steps to repair or replace. 2. At the time of the survey it was observed that bedroom door 2 had resistance opening and closing due to dragging on the floor. This is not compliant with the rule. Take the necessary steps to repair the door. 3. At the time of the survey it was observed that the dryer cap damper was partially open due to lint build up. This is not compliant with the rule. Take the necessary steps to routinely clean the dryer vent line and dryer cap. 4. At the time of the survey it was observed that the handrails at the back ramp were rusting. This is not compliant with the rule. Take the necessary steps to repair the handrail.	C 174		