Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL001113	A. BUILDING: **01** B. WING _____	R **05/14/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WE CARE FAMILY CARE	**1718 MORGANTON ROAD** **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
{C 000}	Initial Comments Report by David Hickman DHSR Construction Section conducted a Biennial Follow-up Survey on May 14, 2025 from 9:15 AM to 10:10 AM at the above-referenced facility. At the time of the survey, not all deficiencies were corrected therefore further action is required. 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. There were previous deficiencies that were not closed out from an open biennial survey, these deficiencies were brought forward from the previous survey. 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 remaining cited deficiencies are as follows:	{C 000}		
{C 100}	New Construction, Modifications SECTION .0300 - THE BUILDING 10A NCAC 13G .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each family care home shall be applied as follows: (1) New construction and existing buildings proposed for use as a Family Care Home shall comply with the requirements of this Section; (3) New additions, alterations, modifications and repairs shall meet the requirements of this Section;	{C 100}		

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{C 100}	Continued From page 1 This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that there had been some alterations to the home and further alterations were were going to be needed to comply with the Family Care Home regulations. Due to the alterations required, we recommend that a project be submitted for a review. This will ensure that the home can conform to the requirements of the Family Care Home rules. The project submitted needs to be for alterations to a Family Care Home. * A new project for alterations still needs to be submitted. The changes to the dining room, living room and bedrooms will be evaluated at that time.	{C 100}	The adminstrator is responsible for ensure that home is in compliance with all state regualtions. Project submittal submitted May 30, 2025 which included pictures, diagram and floor plan. Payment was also mailed certified.	5/30/2025