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
	FCL068035	A. BUILDING _____ B. WING _____	04/22/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIVEWELL COKER HILLS	202 N ELLIOTT ROAD CHAPEL HILL, NC 27514

(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 The Adult Care Licensure Section conducted an annual survey on April 22, 2025.	C 000		
C 098	10A NCAC 13G .0316 (c) Fire Safety And Disaster Plan 10A NCAC 13G .0316 Fire Safety And Disaster Plan (c) Any fire safety requirements required by city ordinances or county building inspectors shall be met. This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure fire safety requirements required by city ordinances or county building inspections were met. The findings are: Observation of the facility on 04/22/25 at 10:39am revealed there was a fire inspection filed in the facility's inspection reports dated 03/06/23 with no violations cited. Request for the facility's current fire safety inspection report from the facility's Manager of Environmental Services were made on 04/22/25 at 10:10am and 4:10pm. Telephone interview with the local Assistant Fire Marshall on 04/22/25 at 11:00am revealed: -The city ordinances required an annual fire	C 098	Fire Marshall was contacted on 04/24/25 and he made a visit to the facility that week. Going forward, the facility now has a tracking system to ensure that Fire Marshall visits according to regulations. Tracking system is being managed by Operations Director and RN Chief Care Officer to ensure compliance with regulations. Nicole Combs RN 5/23/25	

reviewed and acknowledged 06/26/25

C 098	Continued From page 1 safety inspection for family care homes. -The Fire Marshall's office did not schedule fire safety inspections until the facility completed a request for fire inspection -The facility could complete a request for fire safety inspection via the Fire Marshall's web site or by telephone. -The Fire Marshall's office would schedule the inspection on their work assignment calendar. -There was no scheduled fire safety inspection on the work assignment calendar and no documentation available for a fire safety inspection in 2024. -The facility should request a fire safety inspection and an inspector would complete the inspection promptly. Interview with the facility's Manager of Environmental Services on 04/22/25 at 11.30am revealed: -He was responsible to ensure the facility's fire inspection was current. -The facility contracted a fire safety inspection company to annually inspect the fire alarm system and sprinkler system -He thought the the fire alarm system and sprinkler system inspection was forwarded to the local Fire Marshall's office and the Fire Marshall's office used the contractor's inspection to complete the facility's annual Fire Marshall's report. -He was unable to locate a fire inspection more recent than 03/06/23. Interview with the Administrator on 04/22/25 at 5:00pm revealed: -The facility's Manager of Environmental Services was responsible to ensure all fire inspections were in compliance. -She was aware fire safety inspections should be	C 098	Nicole Cobaw 5/22/25	

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C 098	Continued From page 2 completed annually. -She did not know the facility's most current city fire safety inspection report was dated 03/06/23. Interview with the facility's Owner on 04/22/25 at 5:10pm revealed it was the responsibility of the facility's Manager of Environmental Services and Administrator to ensure annual fire safety inspections were completed.	C 098		
C 261	10A NCAC 13G .0904 (b)(1) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service (b) Food Preparation and Service in Family Care Homes: (1) Table service shall include a napkin and non-disposable place setting consisting of a knife, fork, spoon, plate, and beverage containers. This Rule is not met as evidenced by: Based on observations and interviews: the facility failed to assure non-disposable plates were used for 2 of 2 residents (#1, #2) observed during the breakfast and lunch meals on 04/22/25. The findings are: Observation of the breakfast meal on 04/22/25 from 8:40am to 9:15am revealed. -Residents #1 and #2 were served breakfast on disposable dinner plates with plastic forks. -Resident #1 and #2 were served beverages in non-disposable tumblers. -Residents #1 and #2 were served 3 bacon strips sliced bananas, toast, orange juice and water	C 261	All staff were notified 4-23-2025 regarding regulations of not using disposable products during meals A memo to all staff was sent out on 04/23/2025 to ensure compliance with this issue RN/Administrator/Chief Care Officer will ensure compliance with this issue by observing meal times at various times/days. 5/23/25 Nicole Cintos RN	

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C 261	Continued From page 3 Observation of the lunch meal on 04/22/25 from 11:40am to 12:10pm revealed: -Residents #1 and #2 were served lunch on disposable dinner plates with plastic forks and knives. -Resident #1 and #2 were served beverages in non-disposable tumblers -Residents #1 and #2 were served carrots, oven-broiled pork chops, canned beets, dinner rolls, and pound cake Interview with the Supervisor-in-Charge on 04/22/25 at 12:20pm revealed: -She served breakfast and lunch today on paper plates and used plastic forks and knives because the facility only had 2 residents as of 04/21/25. -She did not routinely serve residents' meals on disposable plates or provide plastic utensils -She just decided to use the disposables today. -The facility had plenty of non-disposable plates and metal utensils. Interview with Resident #2 on 04/22/25 at 5:10pm revealed: -Disposable plates were used to serve food at the facility today but not often. -She did not mind the paper plates and the plastic forks or knives occasionally Interview with Resident #1 on 04/22/25 at 5:12pm revealed: -The resident's meals at the facility were usually served on disposable plates just today but not regularly. -She did not mind being served on paper plates as long as she received food. Interview with the Administrator on 04/22/25 at 5:30pm revealed: -Staff should not be serving meals to residents on	C 261		

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C 261	Continued From page 4 disposable plates or providing plastic forks, spoons or knives. -There were plenty of non-disposable plates and metal utensils available for use. -She had not observed staff serving residents meals on paper plates or providing plastic utensils when she was at the facility. Observation of the kitchen on 04/22/25 at 5:41pm revealed: -There were at least 10 non-disposable ceramic/stoneware plates, numerous bowls and mugs in the cabinets. -There were at least 10 place settings of metal forks, teaspoons, and knives in a cabinet drawer close to the stove.	C 261		

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