

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL-013-05	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/28/2025
NAME OF PROVIDER OR SUPPLIER ANN STREET SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 302 ANN STREET KANNAPOLIS, NC 28081		
(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 Survey on May 28, 2025 from 2:05 pm to 3:25 pm at the above referenced facility. DHSR records indicate the home was first licensed on February 3, 2023 as a Family Care Home six (6) non-ambulatory residents (unable to respond and evacuate without any physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the applicable portions of the 2018 North Carolina Building Code - Section 428.4 Small Nonambulatory 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 147	Outside Entrances/Exits-Single Hand Motion SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn	C 147	July 1st 2025 <i>[Signature]</i>	

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

VKGP21

If continuation sheet 1 of 3

Division of Health Service Regulation

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STREET ADDRESS, CITY, STATE, ZIP CODE

ANN STREET SENIOR LIVING

**302 ANN STREET
KANNAPOLIS, NC 28081**

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C 147	Continued From page 1 buttons on the inside of exit doors shall be removed or disabled. This Rule is not met as evidenced by: 1. At the time of the survey, it was observed that the door in the rear hallway was in the path of egress and did not have single motion unlocking door hardware. This is not compliant with the rule. Take the necessary steps to install the proper single motion unlocking door hardware or a passage door hardware with no locking device.	C 147	July 1st 2025 	
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 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 there were burned out bulbs in multiple locations of the house. This is not compliant with the rule. Take the necessary steps to replace the bulbs as needed. 2. At the time of the survey, it was observed that the bulb for the range hood was not working. This is not compliant with the rule. Take the necessary steps to repair or replace the bulb. 3. At the time of the survey, it was observed that there were multiple loose door knobs throughout	C 174		

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If continuation sheet 2 of 3

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C 174	Continued From page 2 the facility. This is not compliant with the rule. Take the necessary steps to secure the door knobs. 4. At the time of the survey, it was observed that the front attic access was left open with no cover. This is not compliant with the rule. Take the necessary steps to replace the attic access opening cover. 5. At the time of the survey, it was observed that the fire extinguishers were not being monitored on a monthly basis. This is not compliant with the rule. Take the necessary steps to check the extinguishers monthly and sign and date the tags. 6. At the time of the survey, it was observed that the siding on the left gable end was loose and hanging. This is not compliant with the rule. Take the necessary steps to secure the siding. 7. At the time of the survey, it was observed that there was some loose debris next to the storage building. This is not compliant with the rule. Take the necessary steps to remove the debris. 8. At the time of the survey, it was observed that the handrails at the rear deck were loose. This is not compliant with the rule. Take the necessary steps to secure the rails.	C 174	<i>July 1st 2025</i> <i>[Signature]</i>	