STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL012048	A. BUILDING: **01** B. WING _____	**08/19/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
QUAKER MEADOWS FAMILY CARE	**125 CAMELLIA GARDEN STREET MORGANTON, NC 28655**

(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 Jason Murphy DHSR Construction Section conducted a Biennial Survey on August 19, 2025 from 11:15 AM to 12:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 8, 1983 as a Family Care Home for five (5) Ambulatory Residents. In accordance with the 1984 Family Care Home Rules, there was a capacity increase to six (6) ambulatory residents (able to evacuate and respond 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 1984 "Rules for Family Care Homes minimum and desired standards and regulations", the 2025 Rules 10A NCAC 13G for Family Care Homes, the 1978 North Carolina State Building Code - Section 409.1(g) - Residential Care Facilities. NOTE: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with on-site 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. 3.) At the time of the survey, the facility was not serving any residents. The cited deficiencies are as follows:	C 000		

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C 034	Continued From page 1	C 034		
C 034	10A NCAC 13G .0302 (n) Fire/Sanitation reports Design and Constructi 10A NCAC 13G .0302 Design and Construction (n) The facility shall maintain and have available for review current sanitation and fire safety inspection reports. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the most recent sanitation inspection reports were not on site and available for review. This is not compliant with the rule. Take the necessary steps to provide the reports for review. Copies of said reports are to be kept on-site for periodic review by both Licensure and DHSR construction sections.	C 034		
C 102	10A NCAC 13G .0317 (a) Maintenance Building Service Equipment 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.	C 102		

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C 102	Continued From page 2 This Rule is not met as evidenced by: 1. At the time of the survey, it was observed that the exterior dryer vent was loose. This is not compliant with the rules. Take the necessary steps to properly secure the dryer vent. 2. At the time of the survey, it was observed that the range hood was missing a light bulb cover. This is not compliant with the rules. Take the necessary steps to provide a range hood light bulb cover. 3. At the time of the survey, it was observed that extension cords were being used in the kitchen of the facility. This is not compliant with the rules. Take the necessary steps to replace the extension cords with an approved surge protector. 4. At the time of the survey, it was observed that there were several burnt light bulbs at the facility. This is not compliant with the rules. Take the necessary steps to replace all burnt light bulbs. 5. At the time of the survey, it was observed that there were no dividers in the single closets of double-occupied bedrooms 1 and 3. This is not compliant with the rules. Take the necessary steps to install a divider in all double-occupied bedrooms with single closets. 6. At the time of the survey, it was observed that the electrical panel had open spaces. This is not compliant with the rules. Take the necessary steps to cover all open spaces in the electrical panel.	C 102		