| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | FCL081054 | A. BUILDING: **01**<br>B. WING _____ | **01/15/2016** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **LISA'S FAMILY CARE HOME # 1** | **542 FOREST LAKE ROAD FOREST CITY, NC 28043** |

| (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<br><br>Report by Glenn Hoppin<br><br>DHSR Construction Section conducted a biennial survey on January 15, 2016 from 9:00am until 10:30am at the above referenced facility. DHSR records indicate the home was first licensed on December 17, 1986 as a Family Care Home for Six 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 applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, and the 1978 (Rev 8) North Carolina State Building Code - Section 409.1G - Residential Care Facilities.<br><br>*Note: The facility was heavily damaged by fire in November of 2014. The facility was rebuilt and conformed to the 2012 North Carolina State Building Code section 425.2.<br><br>At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows: | C 000 | | |
| C 135 | Bathroom-Hand Grips<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0309 BATHROOM<br>(e) Hand grips shall be installed at all commodes, tubs and showers used by the residents.<br><br>This Rule is not met as evidenced by:<br>Observations revealed that the hall bath does not have hand grips on the Toilet. Have a qualified | C 135 | | |

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|---|---|---|---|---|
| C 135 | Continued From page 1<br>technician install handgrips on the hall bath toilet. Provide photo documentation to the DHSR Construction Section when this is complete. | C 135 | | |