

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL017056</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/17/2019</b>
NAME OF PROVIDER OR SUPPLIER  <b>ABUNDANT LIVING # 2</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3816 CHERRY GROVE ROAD ELON, NC 27244</b>		
(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 Glenn Hoppin  DHSR Construction Section conducted a Biennial Survey on October 16, 2019 from 2:00 PM to 3:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on September 30, 2019 as a Family Care Home for six (6) ambulatory Residents (able 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 the applicable portions of the 2012 North Carolina Building Code - Section 425.2 - Residential Care Homes  NOTES:  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.  The cited deficiencies are as follows:	C 000		
C 117	Have Current San. And Fire Safety Approvals  SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for	C 117		

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

TITLE

(X6) DATE

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C 117	Continued From page 1  review.  This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the facility did not have current approved fire and sanitation reports were not available onsite for review. This is not compliant with the rule.	C 117		
C 152	Floors  10A NCAC 13G .0314 FLOORS (a) All floors in a family care home shall be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs shall not be used. (c) All floors shall be kept in good repair.  This Rule is not met as evidenced by: At the time of the survey it was observed that the floor rugs at the doors are frayed and present a trip hazard. This is not compliant with the rule.	C 152		
C 153	Houskeeping And Furnishings-Clean, Repaired  SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes.  This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the bathrooms are unkempt and dirty throughout the facility. This is not compliant with the rule.	C 153		

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C 153	Continued From page 2  2. At the time of the survey it was observed that the client bedrooms are very unkempt and dirty. This is not compliant with the rule.	C 153		
C 172	Fire Safety-Four Rehearsals  SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved.  This Rule is not met as evidenced by: At the time of the survey DHSR Construction Section conducted a live fire drill was conducted by activating the homes residential smoke detectors. None of the residents reacted or evacuated the facility. This is not compliant with the rule.	C 172		
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.	C 174		

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C 174	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> <li>1. At the time of the survey it was observed that the electrical meter base and breaker panel have detached from the building. This is not compliant with the rule.</li> <li>2. At the time of the survey it was observed there are several broken windows on the exterior of the building. This is not compliant with the rule.</li> <li>3. At the time of the survey it was observed that the fire alarm control panel was powered down. This is not compliant with the rule.* Note: the interconnected electrical smoke detectors were operational at the time of the survey.</li> <li>4. At the time of the survey it was observed that the kitchen range hood was not working. This is not compliant with the rule.</li> <li>5. At the time of the survey it was observed the the exit lights did not work when tested under battery. This is not compliant with the rule.</li> <li>6. At the time of the survey it was observed that the GFCI receptacle in the hall bath was loose. This is not compliant with the rule.</li> <li>7. At the time of the survey it was observed that the toilet in the hall bath is running continuously. This is not compliant with the rule.</li> <li>8. At the time of the survey it was observed that the night lights did not work. This is not compliant with the rule.</li> <li>9. At the time of the survey it was observed that the fire extinguishers were not being checked and initialled on a monthly basis. This is not</li> </ol>	C 174		

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C 174	Continued From page 4  compliant with the rule.  10. At the time of the survey it was observed that the window in the office has been repaired with unpainted wood that does not fit the window. This is not compliant with the rule.	C 174		