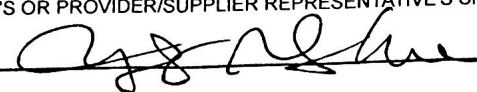


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011196	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/15/2023
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NAME OF PROVIDER OR SUPPLIER EVERGREEN LIVING HOME #11	STREET ADDRESS, CITY, STATE, ZIP CODE 351 FAMILY RIDGE ROAD LEICESTER, NC 28748
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(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	<p>Initial Comments</p> <p>Report by Jonathan Gamsey</p> <p>DHSR Construction Section conducted a Biennial Survey on November 15, 2023 from 09:00 AM to 09:20 AM at the above referenced facility. DHSR records indicate the home was first licensed on October 16, 1997 as a Family Care Home for six (6) Residents with up to three (3) non ambulatory residents (unable to respond and evacuate without 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 1992 Minimum Standards and Regulations for Family Care Homes, the applicable portions of the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 1996 North Carolina State Building Code - Section 419.3 - Small Residential Care facilities</p> <p>* At the time of the survey the facility was not serving any residents.</p> <p>NOTES:</p> <p>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.</p> <p>2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.</p> <p>The cited deficiencies are as follows:</p>	C 000		
C 162	Bedroom Furnishings-Bed	C 162		
SECTION .0300 - THE BUILDING				

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE ADMINISTRATOR.	(X6) DATE 1/4/24
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL011196	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 11/15/2023
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C 162	<p>Continued From page 1</p> <p>10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS</p> <p>(b) Each bedroom shall have the following furnishings in good repair and clean for each resident:</p> <p>(1) A bed equipped with box springs and mattress or solid link springs and no-sag innerspring or foam mattress. Hospital bed appropriately equipped shall be arranged for as needed. A water bed is allowed if requested by a resident and permitted by the home. Each bed is to have the following:</p> <p>(A) at least one pillow with clean pillow case;</p> <p>(B) clean top and bottom sheets on the bed, with bed changed as often as necessary but at least once a week; and</p> <p>(C) clean bedspread and other clean coverings as needed;</p> <p>(e) This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by:</p> <p>1.) At the time of the survey, the facility was under construction and was missing bedframes in multiple bedrooms. This is not compliant with the rule. Take the necessary steps to ensure all bedrooms have the proper furnishing to meet the rule. Take photos once all rooms are furnished and send them to DHSR</p>	C 162	<p>will arranged</p> <p>Bed Room Bed Frames will be arranged</p>	<p>1/20/24</p> <p>1/20/24</p>
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C 166	<p>Living Room Furnishings</p> <p>SECTION .0300 - THE BUILDING</p> <p>10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS</p> <p>(c) The living room shall have functional living room furnishings for the comfort of aged and disabled persons, with coverings that are easily cleanable.</p>	C 166	<p>Living Room shall have functional furnishing for comfort of aged & disabled person.</p>	<p>1/20/24</p>
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Division of Health Service Regulation

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C 166	Continued From page 2 (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, the facility was under construction and was missing furniture in the living room. This is not compliant with the rule. Take the necessary steps to ensure the living room has proper furnishing to meet the rules. Take photos once the living room is furnished and send them to DHSR	C 166	Living Room furniture will be set up	1/20/24
C 167	Dining Room Furnishings SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (d) The dining room shall have the following furnishings: (1) tables and chairs to seat all residents eating in the dining room; and (2) chairs that are sturdy, non-folding, without rollers unless retractable or on front legs only, and designed to minimize tilting. (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, the facility was under construction and was missing furniture in the dining room. This is not compliant with the rule. Take the necessary steps to ensure the dining room has proper furnishing to meet the rules. Take photos once the dining room is furnished and send them to DHSR	C 167	tables Dining Room chairs will be sturdy.. Dining Room Furniture will be set up	1/20/24 1/20/24
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING	C 174		

Division of Health Service Regulation

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C 174	<p>Continued From page 3</p> <p>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT</p> <p>(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.</p> <p>(j) This Rule shall apply to new and existing family care homes.</p> <p>This Rule is not met as evidenced by:</p> <p>1.) At the time of the survey, it was observed that the flooring was being redone in the facility. The work has not been finished. Take photos of the completed flooring once it's done to DHSR.</p> <p>2.) At the time of the survey, it was observed that the fire extinguishers were not being monitored. This is not compliant with the rule. Take the necessary steps to monitor the fire extinguishers monthly to ensure they can be used in a time of need.</p>	C 174		
C 180	<p>Building Service Equipment-Call System</p> <p>SECTION .0300 - THE BUILDING</p> <p>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT</p> <p>(f) Where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that it can be activated with a single action and remain on until deactivated by staff. The call system activator shall be within reach of resident lying on his bed.</p> <p>(j) This Rule shall apply to new and existing family care homes.</p>	C 180	<p><i>Southern Alarm Company Tech was sent out to look at issue</i></p> <p><i>Southern Alarm Company contacted construction division to clarify. Company gave quote and stated they would schedule tech to fix call system</i></p> <p><i>light</i></p>	<p><i>12/22/23</i></p> <p><i>12/28/23</i></p>

Division of Health Service Regulation

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C 180	Continued From page 4 This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that the call system is not working as intended being able to be deactivated by a receiver. This is not compliant with the rule. Take the necessary steps to change the programming of the digital call system and or replace the system so that it can only be deactivated by the original call button that was pressed by the resident.	C 180	Alarm Company technician scheduled to arrive for re pair Southern Alarm will come on Friday around 3pm	11/15/23
C 183	Outside Premises-Clean, Safe SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that at the front of the facility it had pallets for the construction projects happening in the facility. This is not compliant with the rule. Take the necessary photos of the property once construction is done to verify all debris is removed from the property and sent to DHSR 2.) At the time of the survey, it was observed that the bottom of the siding was showing signs of deterioration, and chipping paint. This is not compliant with the rule. Take the necessary steps to repair, replace and paint the siding as needed.	C 183		





FIRE
EXIT
2ND FLOOR























