

98-742

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL092080	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 07/02/2015
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NAME OF PROVIDER OR SUPPLIER POOLE ROAD FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 5818 POOLE ROAD RALEIGH, NC 27610
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C 000	<p>Initial Comments</p> <p>This report is of a biennial construction survey done by Bob Getchell on July 2, 2015.</p> <p>This facility was first licensed as a Family Care Home for six (6) ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency) on January 01, 1984. With amendment of the 1978 NCSBC effective February 1, 1983, and the revision of the 1977 Licensure Rules effective April 1, 1984, FCHs were allowed to increase capacity to six all ambulatory residents. Based on this we are requiring the home to be in compliance with the 1977, 1984, and the applicable portions of the 2005 Rules (10A NCAC 13G) for the Licensing of Family Care Homes, the 1968 North Carolina Uniform Residential Building Code (Volume I-B), and, the 1978 North Carolina State Building Code - Section 409.1(g), Residential Care Facilities.</p> <p>Deficiencies were noted which will require a new plan of correction.</p>	C 000	<p>All of the correction listed on the survey will be done on and by August 30, 2015</p>	8-30-15
C 101	<p>Existing Licensed-No Less than '71 Rules</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each family care home shall be applied as follows: (2) Except where otherwise specified, existing licensed homes or portions of existing licensed homes shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration; however, in no case shall the requirements for any licensed home, where no addition or renovation has been made, be less</p>	C 101	<p>CONSTRUCTION SECTION AUG 20 2015 RECEIVED</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Denise Lucas</i>	TITLE <i>Administrator</i>	(X6) DATE 8-19-15
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C 101	<p>Continued From page 1</p> <p>than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Family Care Homes", copies of which are available at the Division of Health Service Regulation - Construction Section, 701 Barbour Drive, Raleigh, North Carolina 27603 at no cost;</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building fire protection equipment was not installed in accordance with the Licensure Rules and Building Code in effect when the facility was first licensed. This would affect all residents by not detecting smoke, activating the fire alarm, and directing residents from the building.</p> <p>Findings include:</p> <p>a. There is no smoke detector installed in the immediate vicinity outside the staff bedroom.</p> <p>This is not in accordance with 1997 (1999 Revision) North Carolina State Residential Building Code requiring smoke detectors be installed in each sleeping room, and in the immediate vicinity outside of each sleeping room.</p>	C 101	<p>Smoke detector installed August 30, 2015</p> <p>The smoke detector will be installed</p>	8-30-15
C 137	<p>Bathroom-Mechanical Ventilation</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM</p> <p>(g) The bathrooms shall be lighted to provide 30 foot candles of light at floor level and have mechanical ventilation at the rate of two cubic feet per minute for each square foot of floor area. These vents shall be vented directly to the outdoors.</p> <p>This Rule is not met as evidenced by:</p>	C 137	<p>repaired by August 30, 2015</p>	8-30-15

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C 137	Continued From page 2 1. Based on observation, the bathroom window was not maintained operable. Findings include: a) back right bathroom window can not be opened for fresh air. Provide mechanical ventilation. b) The back right bathroom window has broken glass.	C 137	<i>Will be repaired by August 30, 2015</i>	<i>8-30-15</i>
C 148	Outside Entrances/Exits-Free of Obstructions SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (e) All entrances/exits shall be free of all obstructions or impediments to allow for full instant use in case of fire or other emergency. This Rule is not met as evidenced by: 1. Based on observation, the facility was not maintained in a safe manner by having a path of egress blocked. Findings include: a) The front porch has an awning on the left side that hangs down to about 5'6", blocking egress off the porch in an emergency. b) The corridor door at the front entrance, in the path of egress, has locking hardware.	C 148	<i>Awning will be repaired by August 30, 2015</i>	
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails.	C 149		

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C 149	Continued From page 3 This Rule is not met as evidenced by: 2. Based on observation, the facility was not maintained in a safe manner by having a handrail missing. Findings include: a) The front porch has steps down the left side which have only one handrail	C 149	<i>handrail will be repaired by August 30, 2015</i>	
C 151	Laundry Room SECTION .0300 - THE BUILDING 10A NCAC 13G .0313 LAUNDRY ROOM The laundry equipment in a family care home shall be located out of the living, dining, and bedroom areas. This Rule is not met as evidenced by: 1. Based on observation, the dryer exhaust duct was not maintained operable. Findings include: The backdraft damper on the dryer exhaust is stopped up with lint, and coming loose from the side of the house.	C 151	<i>Laundry damper will be repaired by August 30, 2015</i>	
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: 1. Based on observation, the floor in the main corridor was not maintained safe	C 152		

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C 152	Continued From page 4 Findings include: The grate for the floor furnace has broken causing it to shift when stepped on and exposing residents to a trip hazard	C 152	<i>The grate has already been repaired</i>	7-15-15
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. Based on observation, the resident furnishings were not maintained in good repair. Findings include: a) Bedroom 4 has an end table that is missing a drawer handle, b) Bedroom 3 has a chest of drawers that is missing handles, c) Bedroom 2 has an end table that is missing a drawer handle,	C 153	<i>All Bedroom end tables knobs have been replaced Bedrooms 4, 3, 2 have been repaired</i>	7-15-15
C 168	Fire Extinguishers SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (a) Fire extinguishers shall be provided which meet these minimum requirements in a family care home:	C 168		7-15-15

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C 168	<p>Continued From page 5</p> <p>(1) one five pound or larger (net charge) "A-B-C" type centrally located;</p> <p>(2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and</p> <p>(3) any other location as determined by the code enforcement official.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would affect all residents by not having fire protection equipment operable for use in an emergency.</p> <p>Findings include:</p> <p>The inspection tags on the fire extinguishers indicate that required monthly checks are not being performed per NFPA 10</p>	C 168	<p>The tags on the extinguishers have been signed and will continue to be checked each month</p>	7-15-15
C 174	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - THE BUILDING 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. Based on observation, the back exterior porches and steps were not maintained safe.</p> <p>Findings include:</p> <p>a) The back deck has no cross bracing on the 4x4 posts to stabilize the structure.</p> <p>b) The steps on the exit door have no cross</p>	C 174	<p>The brace will be placed on the post to stabilize the</p>	

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C 174	<p>Continued From page 6</p> <p>bracing to stabilize the structure</p> <p>2. Based on observation, egress from all areas was not maintained in a safe manner by having bedroom windows that are stuck shut. This would affect the residents by not allowing free egress in an emergency.</p> <p>Findings include: The window is stuck shut in the Staff bedroom</p> <p>3. Based on observation, the facility components were not maintained operable by having doors that did not close completely and latch. This could affect a residents privacy.</p> <p>The following doors have issues: a) Front right bedroom door won't close and latch, b) Front right bedroom closet door will not close and latch, c) Bedroom 1 has a closet door with no hardware, d) The front bathroom door has no latch, e) The Staff bedroom door has the latch installed backwards,</p> <p>4. Based on observation, the facility showers were not maintained safe.</p> <p>Findings include: The back shower has no hand grip.</p> <p>5. Based on observation, the facility interior building components were not maintained.</p> <p>Findings include: There are walls and ceilings damaged in the following locations: a) Front right bedroom ceiling has damage from a leak, b) Bedroom 1 has wall damage.</p>	C 174	<p>the steps and a brace will also be put on the rear door steps</p> <p>Staff bedroom door has been repaired. Latch latch has been installed hardware has been replaced in bedroom 1. front bathroom latch has been replaced. Staff bedroom hardware replaced the handrail in stalled shower. front bedroom ceiling repaired</p>	<p>7-25-15</p> <p>7-15-15</p>

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C 174	<p>Continued From page 7</p> <p>Based on observation, the facility electrical system was not maintained in a safe manner by not using acceptable wiring methods.</p> <p>Findings include:</p> <p>a) There are three wiring junctions in the attic that are not contained inside of a mounted junction box.</p>	C 174	<p><i>Junction box will be installed by</i></p>	<p><i>7-30-15</i></p>