

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL046021</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/19/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>STEPHENSON FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>316 EAST RICHARD STREET AHOSKIE, NC 27910</b>
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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 Suzanna Fay</p> <p>DHSR Construction Section conducted a Biennial Survey on May 19, 2016 from 3:20 PM to 4:20 PM at the above referenced facility. DHSR records indicate the home was first licensed on November 23, 2009 as a Family Care Home for five 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 2005 Rules 10A NCAC 13G for Family Care Homes and the 2009 North Carolina State Building Code - Section 421.2 - Residential Care Homes.</p> <p>At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:</p>	C 000		
C 109	<p>Construction-Two Stories</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION</p> <p>(f) If the building is two stories in height, it shall meet the following requirements:</p> <p>(1) Each floor shall be less than 2500 square feet in area if existing construction or, if new construction, shall not exceed the allowable area for R-4 occupancy in the North Carolina State Building Code;</p> <p>(2) Aged or disabled persons are not to be housed on any floor above or below grade level;</p> <p>(3) Required resident facilities are not to be located on any floor above or below grade level; and</p> <p>(4) A complete fire alarm system with pull stations on each floor and sounding devices</p>	C 109		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 109	Continued From page 1  which are audible throughout the building shall be provided. The fire alarm system shall be able to transmit an automatic signal to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection.  This Rule is not met as evidenced by: 1. Observations revealed that the facility did not have pull stations at each level that transmitted to a monitoring company. Have a qualified technician install pull stations at each level that are audible throughout the facility and that signal the fire department directly or are covered by a monitoring company that notifies the fire department. Provide documentation of this correction in the form of receipts or work orders.	C 109		
C 137	Bathroom-Mechanical Ventilation  SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (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.  This Rule is not met as evidenced by: 1. Observations revealed that the Client bathroom was not mechanically vented. Have a qualified technician install mechanical ventilation for the bathroom. Provide documentation of the repairs in the form of receipts or work orders.	C 137		
C 148	Outside Entrances/Exits-Free of Obstructions	C 148		

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C 148	Continued From page 2  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. At the time of this survey, there was a ladder and other items outside the door to the exterior ramp blocking passage to the ramp. Remove the stored items to maintain the exits. Provide documentation of the repairs in the form of photos.	C 148		
C 169	Fire Safety-Smoke Detectors  SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (b) The building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup. Note: Smoke detectors are required to be interconnected by this Rule. The application of the Rule permits the heat detectors to be interconnected with smoke detectors, but does not require it.  This Rule is not met as evidenced by: 1. Observations revealed two Staff bedrooms upstairs. Neither of the bedrooms had smoke detection. Have a qualified technician install smoke detectors in each bedroom wired to the	C 169		

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C 169	Continued From page 3  house current, interconnected with the other smoke detectors in the facility and with battery backup. Provide documentation of the repairs in the form of receipts or work orders.	C 169		
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.  This Rule is not met as evidenced by: 1. Observations revealed that the metal transition strip leading into the computer room was loose and bent up creating a tripping hazard. Secure the metal strip to prevent tripping. Provide documentation of the repairs in the form of photos or receipts.  2. Observations revealed that the left handle on the window in Room 1 was broken off. Have qualified technician replace the handle so that the window is easy to open. Provide documentation of the repairs in the form of photos or receipts.  3. Observations revealed that the floor vent in the bathroom was loose and may be too small for the opening. Install a secure vent that meets the size of the vent opening. Provide documentation of the repairs in the form of photos, receipts or work orders.  4. Observations revealed a 1/2" board nailed to	C 174		

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C 174	<p>Continued From page 4</p> <p>the floor in front of the right sink. The board poses a tripping hazard. Install a flat or beveled edge cover or patch the floor properly to prevent tripping. Provide documentation of the repairs in the form of photos, receipts or work orders.</p> <p>5. Observations revealed that the countertop for the right sink in the bathroom was not secure and was not properly fitted to the cabinet. The wallpaper was torn at the edge of the sink. Have a qualified technician fit and secure the countertop and repair the damaged wall. Provide documentation of the repairs in the form of photos, receipts or work orders.</p> <p>6. At the time of this survey, the outlet at the right bathroom sink did not have power. Have a qualified technician repair or replace the outlet. Provide documentation of the repairs in the form of receipts or work orders.</p> <p>7. Observations revealed that the outside stringer of the exterior stair had sheared off and separated at the bolt at the intermediate landing. Have a qualified technician repair the stair. Provide documentation of the repairs in the form of photos, receipts or work orders.</p>	C 174		
C 180	<p>Building Service Equipment-Call System</p> <p>SECTION .0300 - THE BUILDING 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</p>	C 180		

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C 180	<p>Continued From page 5</p> <p>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> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the Staff bedrooms were located upstairs. Interview with Staff revealed that the facility does not have 24 hour awake Staff. Have a qualified technician install a call system in accordance to the licensure requirements. Provide documentation of the repairs in the form of receipts or work orders.</p>	C 180		