

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL080024	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/06/2018
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NAME OF PROVIDER OR SUPPLIER LIBBY FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 4035 WOODLEAF-BARBER ROAD CLEVELAND, NC 27013
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C 000	<p>Initial Comments</p> <p>Report by Luis Padilla</p> <p>DHSR Construction Section conducted a Biennial Survey on September 6, 2018 from 11:35 AM to 1:10 PM at the above referenced facility. DHSR records indicate the home was first licensed on October 22, 2007 as a Family Care Home for three (3) ambulatory Residents (able to respond and evacuate 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 2002 North Carolina State Building Code - Residential (One & Two Dwelling) - Section R101.2.</p> <p>At the time of our visit, we cited deficiencies that require an acceptable plan of correction; all deficiencies listed below were discussed with on-site staff during the exit interview. The listed deficiencies are as follows:</p>	C 000		
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 than those requirements found in the 1971</p>	C 101		

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

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C 101	<p>Continued From page 1</p> <p>"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.) The rule requires 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 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>During our visit it was observed that the smoke detectors of the home were not permanently connected to the house current. This is not compliant with the rule.</p> <p>The home was placed on a Fire Watch and a Plan of Protection was issued on site. Staff is required to walk around the home and ensure no fires happen on a regular basis until the deficiency has been corrected. This action must also be documented. Once the deficiency has been corrected provide documentation of the fire watch as well as any invoices along with your Plan of Correction.</p> <p>2.) The rule requires Except where otherwise</p>	C 101		

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C 101	<p>Continued From page 2</p> <p>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 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>During our visit it was observed that the laundry room of the home did not seem to be properly treated with fire retardant paint, per the manufactures instructions. This is not compliant with the rule.</p> <p>Make arrangements to apply the fire retardant paint per the manufactures instructions. Once completed provide documentation in the form of photos for all completed work.</p>	C 101		
C 111	<p>Construction-Ceiling</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (h) The ceiling shall be at least seven and one-half feet from the floor.</p> <p>This Rule is not met as evidenced by: 1.) The rule requires the ceiling shall be at least seven and one-half feet from the floor:</p> <p>During our visit it was observed that the in several</p>	C 111		

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C 111	Continued From page 3 areas of the home the ceiling did not meet the intent of the rule. These areas include: Bedroom 1, Bedroom 2, the hallway to the rear exit and the ceiling in the half bath. The ceiling height for all three locations is about 7 ft 2 in. Make arrangements to have the deficiency corrected; provide documentation in the form of invoices/receipts for all completed work. This was cited during our last survey on August 6, 2015.	C 111		
C 140	Storage Areas-Separate, Locked SECTION .0300 - THE BUILDING 10A NCAC 13G .0310 STORAGE AREAS (b) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be supervised while in use. This Rule is not met as evidenced by: 1.) The rule requires there shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled: During our visit it was observed that there were cleaning agents being stored in the sink cabinet of the bathroom. The cabinet was not locked as well. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 140		
C 169	Fire Safety-Smoke Detectors	C 169		

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C 169	<p>Continued From page 4</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1.) The rule requires 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:</p> <p>During our visit it was observed that the heat detector in the attic was chirping and had a dying battery. This is not compliant with the rule.</p> <p>Make arrangements to correct the deficiency, ensure the device is a 192-212 rated heat detector and that it is on a dedicated sounding device. Once completed provide documentation in the form of invoices for all completed work.</p> <p>2.) The rule requires the building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L.</p>	C 169		

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C 169	<p>Continued From page 5</p> <p>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:</p> <p>During our visit it was observed that the smoke detector in the bathroom hallway was not battery back up. This is not compliant with the rule.</p> <p>Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.</p>	C 169		
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: 1.) The rule requires the building equipment in a family care home shall be maintained in a safe and operating condition:</p> <p>During our visit it was observed that the doors for the home (Bathroom, Bedroom 1, Bedroom 2, and Staff Bedroom) would not latch properly. This is not compliant with the rule.</p> <p>Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.</p>	C 174		

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C 174	<p>Continued From page 6</p> <p>2.) The rule requires the building equipment in a family care home shall be maintained in a safe and operating condition:</p> <p>During our visit it was observed that there were clasp locks being utilized on the two Bedroom doors. This is not compliant with the rule.</p> <p>Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.</p> <p>3.) The rule requires the building equipment in a family care home shall be maintained in a safe and operating condition:</p> <p>During our visit it was observed that a gate was being utilized to prevent residents and staff from using an inoperable door. There was also a steep ramp located in this area. The gate was found to be unlocked at the time of the survey. This is not compliant with the rule.</p> <p>Make arrangements to ensure the gate remains closed at all times. Once completed provide documentation in the form of photos for all completed work.</p> <p>4.) The rule requires the building equipment in a family care home shall be maintained in a safe and operating condition:</p> <p>During our visit it was observed that floor mats were being utilized in the Kitchen, specifically around the refrigerator and sink, presenting a trip hazard for the home. This is not compliant with the rule.</p> <p>Make arrangements to have the deficiency</p>	C 174		

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C 174	<p>Continued From page 7</p> <p>corrected; provide documentation in the form of photos for all completed work.</p> <p>5.) The rule requires all fire safety equipment in a family care home shall be maintained in a safe and operating condition:</p> <p>During our visit it was observed that the Fire Extinguishers of the home were not being maintained properly. These include:</p> <p>a. Outside the Staff Bedroom a Fire Extinguisher was missing its tag</p> <p>b. Fire Extinguisher in the laundry room was on the floor and last maintained in 2001</p> <p>c. The Fire Extinguishers all throughout the home were not being maintained on a monthly basis.</p> <p>Make arrangements to have the deficiencies corrected. Once completed provide documentation in the form of photos for all completed work.</p> <p>6.) The rule requires all fire safety equipment in a family care home shall be maintained in a safe and operating condition:</p> <p>During our visit it was observed that the heat detector in the kitchen would not activate when tested, this is not compliant with the rule.</p> <p>Make arrangements to correct this deficiency; once completed provide documentation in the form of invoices for all completed work.</p> <p>7.) The rule requires all electrical equipment in a family care home shall be maintained in a safe and operating condition:</p>	C 174		

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C 174	<p>Continued From page 8</p> <p>During our visit it was observed that an extension cord was being used as permanent wiring in the laundry room to power the refrigerator. This is not compliant with the rule.</p> <p>Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.</p>	C 174		