

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL017026	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/29/2018
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NAME OF PROVIDER OR SUPPLIER L & L FAMILY CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 3023 CHANDLER MILL ROAD PELHAM, NC 27311
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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	Initial Comments Report by Paul Dixon DHSR Construction Section conducted a Biennial Survey on November 29, 2018 from 9:30 AM to 10:45 AM at the above referenced facility. DHSR records indicate the home was first licensed on August 8, 1996 as a Family Care Home for six (6) ambulatory Residents (Who are 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 1992 "Rules for Family Care Homes Minimum and Desired Standards and Regulations", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, the 1996 North Carolina State Building Code - Section 419.2 - 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.	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	<i>Inspection will be on 01-07-18 for sanitation and fire + bldg. inspection</i>	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Larry Garston

TITLE

Administrator

(X6) DATE

12-26-18

RECEIVED

DEC 31 2018

CONSTRUCTION SECTION

Division of Health Service Regulation

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C 117	Continued From page 1 review. This Rule is not met as evidenced by: At the time of the survey it was observed that the Fire Inspection was out of date. This is not compliant with the rule.	C 117	<i>The fire inspection will be conducted on 01-17-19</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. This Rule is not met as evidenced by: At the time of the survey it was observed that the front ramp only had a hand rail on one side. NOTE: Hand rails shall extend the full length of the ramp. This is not compliant with the rule.	C 149	<i>The steps has handrails on both sides The front has hand rail all the way down the end of the ramp, on the other side is the wall.</i>	
C 170	Fire Safety-Any Other City Ordinances SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (c) Any fire safety requirements required by city ordinances or county building inspectors shall be met. This Rule is not met as evidenced by: At the time of the survey it was observed that the fire extinguishers in the home were last inspected in 2015. This is not compliant with the rule.	C 170	<i>The fire extinguishers was completed on 12-05-18</i>	