

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL054042 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____ | (X3) DATE SURVEY COMPLETED 09/26/2019 |
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| NAME OF PROVIDER OR SUPPLIER HOBBS HELPING HANDS | STREET ADDRESS, CITY, STATE, ZIP CODE 2504 TOWERHILL ROAD KINSTON, NC 28501 |
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CONSTRUCTION SECTION

| (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 |
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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 26, 2019 from 10:10 AM to 12:00 PM at the above referenced facility. DHSR records indicate the home was first licensed on January 4, 1993 as a Family Care Home for five 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 1992 Family Care Homes Rules T10: 42C, applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 (1992 Revision) North Carolina State Building Code - Section 513.1, Exception 1 - Residential Care Facilities.</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 on-site 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 | <p>@ 140 Storage Areas - Separate, Locked - Section .0303 - The Building - 10A NCAC 13G .0310 Storage Area.</p> <p>1) The bleach was stored under the sink because I was told that eating utensils could not be stored underneath the sink because they may be dripping pipes, but cleaning supplies could be stored underneath the cabinets. Usually all cleaning supplies are stored in a separate cabinet in the laundry room. I just started putting cleaning supplies under the sink in the kitchen; by I was told I could do so by the Environmental Services inspector last year.</p> <p>2) There will be no more cleaning supplies stored underneath the kitchen sink.</p> <p>3) They will be stored in a separate cabinet (locked) in the laundry room.</p> <p>4) By date: immediately. 9/26/19. 10/25/19</p> | |
| C 140 | <p>Storage Areas-Separate, Locked</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0310 STORAGE AREAS (b) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides,</p> | C 140 | | |

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

[Signature]

TITLE
[Signature]

(X6) DATE
11/27/19

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| C 140 | Continued From page 1 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. At the time of the survey it was observed that bleach was being stored under the kitchen sink. This cabinet was not locked off to residents. This is not compliant with the rule. This deficiency was corrected on site. Take measures to ensure against re-occurrence. | C 140 | <i>C 144 Outside Entrances/Exits Two Remote Exits - Section .0300 The Building - 10A NCAC 13G .0312 Outside Entrance and Exits. 1) The Kitchen door was locked not to impend the residents access to the second exit, but to keep the residents from entering the kitchen at night. Each resident has an operable window to exit in their bedrooms if a situation should present it self such as a fire. Depending on the location of the hazard their lives could be in more danger by trying to exit using the second exit. It would be safer to use their bedroom windows to exit.</i> | |
| C 144 | Outside Entrances/Exits-Two Remote Exits SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (a) In family care homes, all floor levels shall have at least two exits. If there are only two, the exit or exit access doors shall be so located and constructed to minimize the possibility that both may be blocked by any one fire or other emergency condition. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that staff locks the Kitchen during the night, impeding the residents access to the second exit. This is not compliant with the rule. | C 144 | <i>2) The Kitchen door will remain unlocked for the safety of the residents.</i> | |
| C 146 | Outside Entrances/Exits-Ramp(s) SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (c) At least one principal outside entrance/exit | C 146 | <i>3) By date immediately 9/26/19</i> | |

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| C 146 | Continued From page 2 for the residents' use shall be at grade level or accessible by ramp with a one inch rise for each 12 inches of length of the ramp. For the purposes of this Rule, a principal outside entrance/exit is one that is most often used by residents for vehicular access. If the home has any resident that must have physical assistance with evacuation, the home shall have two outside entrances/exits at grade level or accessible by a ramp. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the second portion of the front ramp did not meet the 1:12 ratio required for ramps. The ramp had a rise of 26 inches and only extended 12.5 feet. This is not compliant with the rule. | C 146 | <i>146 Outside Entrances/Exits - Ramps - Section 0300 - The Building 10A NCAC 13G .0312 Outside Entrance and Exits - 1) The ramp was built during the time the home was beginning to operate as a Home Care Home. The license has always been for ambulatory residents. Ambulatory meaning there is no assistive devices being used to help the residents ambulate. Each resident is capable of using the steps. Neither of the residents at the facility require physical assistance to evacuate. 9/24/19</i> | |
| C 147 | Outside Entrances/Exits-Single Hand Motion SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that front and back doors of the home are not single hand motion. This is not compliant with the rule. | C 147 | <i>C 147 Section .0300 - The Building 10A NCAC 13G .0312 Outside Entrance and Exits. 1) The door locks were changed during the last Biennial Survey Pictures were sent to confirm compliance with the door locks on the front and back doors - received a letter saying every thing was in compliance</i> | |
| C 149 | Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING | C 149 | | |

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| C 149 | Continued From page 3 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: 1. At the time of the survey it was observed that the rear exit only had one handrail installed for the steps. This is not compliant with the rule. | C 149 | C149 Continued. 2) The locks will be changed again to a single ^{hand} motion lock. 3) The locks will be placed on doors as soon as I can find them and afford them when I find them. | |
| 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. At the time of the survey it was observed that floor rugs were being used in both the Living and Dining Room of the home. This is not compliant with the rule. | C 152 | 3) The locks will be changed to become easily operable by a single hand motion. 4) By date - <i>on going</i> | |
| 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: | C 153 | C149 10A NCAC 13G .0312 Outside Entrance/Exits 1) The rear exit of the facility has always just had one hand rail @ the back entrance. 2) Another hand rail will be added at the rear exit of the facility. 3) By date - <i>10/15/20</i> | |

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| C 153 | Continued From page 4 1. At the time of the survey it was observed that the doors for Bedrooms #1 and #3 would not latch properly. This is not compliant with the rule. 2. At the time of the survey it was observed that a sliding lock was installed for the door of Bedroom 2. This is not compliant with the rule. 3. At the time of the survey it was observed that the kitchen range hood was very dirty and had a build up of grease around it. This is not compliant with the rule. | C 153 | <i>C152 Floors - 10A NCAC 13G .0314 1) The rug in the living room in neither a scatter rug nor a throw rug. It is an area rug. This rug is a 8' by 12' area rug. This rug was placed in the the living room because one of the surveyors said I could put the large area rug in the living room. The rug is attached to the floor, made of non-skid material and it is easily cleanable.</i> | |
| 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. At the time of the survey it was observed that the toilet in the corridor bathroom was loose at its base. This is not compliant with the rule. 2. At the time of the survey, on site staff mentioned that the ceiling in Bedroom #1 would leak when it would rain in the area. This is not compliant with the rule. 3. At the time of the survey it was observed that the Water Heater Tank had a pressure relief valve installed, however it was unable to be verified if it discharges into the crawl space or to the outside. | C 174 | <i>2) The scatter rug in the dining room area has been removed. 9/29/19 3) By date → C153 .0300. The Building 10A NCAC 13G .0315 House Keeping and Furnishings. 1) The doors in bedrooms #1 and #3 - does not catch properly. The door latches were or will be</i> | |

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| C 174 | Continued From page 5 Please verify the location of where the relief valve discharges. | C 174 | C153 changed to become operable The sliding lock was removed from bedroom #2 | |
| 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 the dryer exhaust for the home had a build up of lint around it. This is not compliant with the rule. | C 183 | The range hood was not dirty or greasy it was rusty. The range hood will be cleaned every month to ensure that there are no build up. 2) There will be an instrument put in place to record the monthly cleaning of the range hood. 3) by date - on going | |
| | | C174 | Building-Equipment Maintained State Operating Section .0300 The Building / 10A NCAC 13G .0317 Building Service Equipment A. 1) the toilet in the corridor bathroom was loose at the base - The commode has been | |

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| C 153 | Continued From page 4 1. At the time of the survey it was observed that the doors for Bedrooms #1 and #3 would not latch properly. This is not compliant with the rule. 2. At the time of the survey it was observed that a sliding lock was installed for the door of Bedroom 2. This is not compliant with the rule. 3. At the time of the survey it was observed that the kitchen range hood was very dirty and had a build up of grease around it. This is not compliant with the rule. | C 153 | <i>C174 has been anchored to the floor plenty of times. One residents constantly move around while sitting on the commode. The toilet will be attached to the floor. by There will be periodic checks made to ensure the commode remains attached to the floor.</i> | |
| 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. At the time of the survey it was observed that the toilet in the corridor bathroom was loose at its base. This is not compliant with the rule. 2. At the time of the survey, on site staff mentioned that the ceiling in Bedroom #1 would leak when it would rain in the area. This is not compliant with the rule. 3. At the time of the survey it was observed that the Water Heater Tank had a pressure relief valve installed, however it was unable to be verified if it discharges into the crawl space or to the outside. | C 174 | <i>2) Periodic checks made by staff and continued reminders to the residents causing to be aware of un-warranted movement while using the toilet. 3) By date -</i> | <i>Jan 19</i> |
| | | | <i>B. Ceiling in Bedroom #1 At the time of the survey, the ceiling was not fixed by the owner of the building. Instructions were to wait a couple of days before putting the light bulb and lamp back on the fixture. 2) The ceiling no longer leaks</i> | |

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| C 174 | Continued From page 5 Please verify the location of where the relief valve discharges. | C 174 | <i>174 B. Continued - Leak in Bedroom #1. and the fixtures have been replaced (bulb & lamp)</i> | |
| C 183 | <p>Outside Premises-Clean, Safe</p> <p>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.</p> <p>This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the dryer exhaust for the home had a build up of lint around it. This is not compliant with the rule.</p> | C 183 | <p><i>C. Water Heater Tank had pressure reset valve installed - Owner of facility will contact me when he finds out.</i></p> <p><i>1) By date -</i></p> <p><i>183 Section .0300 - The Building 10A NCAC 13G .0318 Outside Premises -</i></p> <p><i>1) The dryer exhaust for the home had a build up of lint around it.</i></p> <p><i>2) The dryer exhaust will be cleaned periodically (monthly) and or checked for lint build up. Documentation will be made of the check</i></p> <p><i>3) The exhaust ^{check} has been cleaned once since survey -</i></p> <p><i>4) By date → going</i></p> | |