

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL081052	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 01/30/2024
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NAME OF PROVIDER OR SUPPLIER LISA'S FAMILY CARE HOME # 3	STREET ADDRESS, CITY, STATE, ZIP CODE 149 REID STREET FOREST CITY, NC 28043
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C 000	<p>Initial Comments</p> <p>Report by Scott Greenwood</p> <p>DHSR Construction Section conducted a Biennial Survey on January 30, 2024 from 2:45 PM to 3:55 PM at the above referenced facility. DHSR records indicate the home was first licensed on May 11, 1994 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 1991 North Carolina State Building Code - Section 514.1 - Exception 1.</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		
C 102	<p>Rules Are Minimum Requirements</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each family</p>	C 102		

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

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C 102	<p>Continued From page 1</p> <p>care home shall be applied as follows: (4) Rules contained in this Section are minimum requirements and are not intended to prohibit buildings, systems or operational conditions that exceed minimum requirements;</p> <p>This Rule is not met as evidenced by: 1. At the time of the survey it was observed that there was paneling on the walls in the kitchen area and center hallway bathroom. This is not compliant with the rule. Take the necessary steps to treat the paneling with a fire retardant material capable of achieving a Class C Finish or provide documentation of previous treatment.</p> <p>2. At the time of the survey it was observed that the hallway smoke detector was not interconnected with the resident bedroom smoke detectors. This is not compliant with the rule for routine interior maintenance and resident safety. Take the necessary steps to correct this deficiency.</p>	C 102		
C 105	<p>Initial Licensure-Meet NCSBC</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by</p>	C 105		

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C 105	<p>Continued From page 2</p> <p>reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars (\$380.00).</p> <p>(b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home.</p> <p>This Rule is not met as evidenced by: 1. At the time of survey it was observed that the rear section (previous addition) of the home doesn't appear to be code compliant (footers and other supports) this is not compliant with the rule, take action to correct the condition contact your local building official and make any modifications he deems fit to correct the condition and forward verification of compliance to our office in the form of photos and receipts/invoices and approvals of the work performed</p> <p>Note: This deficiency was previously cited during our 12/21/2021 biennial survey, no action has been taken to effectively correct this previously cited deficiency, take actions to maintain compliance.</p>	C 105		
C 117	<p>Have Current San. And Fire Safety Approvals</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION</p> <p>(n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p>	C 117		

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C 117	Continued From page 3 This Rule is not met as evidenced by:	C 117		
C 142	Corridor-Night Lights SECTION .0300 - THE BUILDING 10A NCAC 13G .0311 CORRIDOR (b) Corridors shall be lighted with night lights providing 1 foot-candle power at the floor. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the egress corridor night light was missing. This is not compliant with the rule for routine interior maintenance and resident safety. Take the necessary steps to correct this deficiency	C 142		
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 there was debris stored in the inner section of the front right corner resident bedroom. This is not compliant with the rule for maintaining resident bedrooms in a neat and orderly fashion. Take the necessary steps to correct this deficiency. 2. At the time of the survey it was observed that	C 174		

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C 174	<p>Continued From page 4</p> <p>the right hand side center bedroom egress window was partially blocked by the residents bed. This is not compliant with the rule for egress window access during a potential fire hazard. Take the necessary steps to keep the area in front of the egress window clear at all times.</p> <p>3. At the time of the survey it was observed that the right hand side center bedroom had clothing and other debris on the floor. This is not compliant with rule for maintaining the resident bedroom in a neat and orderly fashion. Take the necessary steps to correct this deficiency.</p> <p>4. At the time of the survey it was observed that the stove vent hood filter was missing. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to correct this deficiency.</p> <p>5. At the time of the survey it was observed that there was dust buildup at the kitchen ceiling fan blades. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>6. At the time of the survey it was observed that there was lint buildup behind the clothes dryer. This is not compliant with the rule for routine interior maintenance and could potentially cause a fire hazard. Take the necessary steps to correct this deficiency.</p> <p>7. At the time of the survey it was observed that the clothes dryer exhaust duct was sealed at the seams with an incorrect type tape. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to seal the clothes dryer duct seams with a metallic type</p>	C 174		

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C 174	<p>Continued From page 5</p> <p>tape.</p> <p>8. At the time of the survey it was observed that the walls and trim in the laundry room area had dirt buildup. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>9. At the time of the survey it was observed that there were burned out and missing light bulbs throughout the facility. This is not compliant with the rule for routine interior maintenance and proper surface lighting. Take the necessary steps to replace the missing and burned out light bulbs on a regular basis.</p> <p>10. At the time of the survey it appeared that the hot water tank pressure relief drain line terminated into the crawl space. This is not compliant with the rule for extending the hot water tank pressure relief drain line to the exterior side of the crawl space to prevent flooding if the hot water tank were to potentially fail. Take the necessary steps to correct this deficiency.</p> <p>11. At the time of the survey it was observed that the staff bedroom smoke detector was making a low battery indication sound. This is not compliant with the rule for routine interior maintenance and safety. Take the necessary steps to replace the smoke detector batteries on a regular basis.</p> <p>12. At the time of the survey it was observed that the ceiling molding in the right hand side center resident bedroom was partially detached. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p>	C 174		

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C 174	<p>Continued From page 6</p> <p>13. At the time of the survey it was observed that the ceiling light fixture globe and bulb were missing in the right hand side center resident bedroom. This is not compliant with the rule for routine interior maintenance and proper surface lighting. Take the necessary steps to correct this deficiency.</p> <p>14. At the time of the survey bit was observed that the center hallway bathroom toilet was loose at the base. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to secure the toilet at the base.</p> <p>15. At the time of the survey bit was observed that the center hallway bathroom exhaust fan had dust buildup. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>16. At the time of the survey bit was observed that the center hallway bathroom vanity sink faucet was loose. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to correct this deficiency.</p> <p>17. At the time of the survey it was observed that the center hallway bathroom light globe was missing. This is not compliant with the rule for routine interior maintenance and resident safety. Take the necessary steps to correct this deficiency.</p> <p>18. At the time of the survey it was observed that the center hallway bathroom bathtub surround molding and missing paint. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p>	C 174		

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C 174	<p>Continued From page 7</p> <p>19. At the time of the survey it was observed that the center hallway bathroom bathtub surround caulking had mildew buildup. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>20. At the time of the survey it was observed that the front left hand side bedroom bathroom exhaust fan had dust buildup. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>21. At the time of the survey it was observed that the front left hand side bedroom bathroom bathtub surround caulking had mildew buildup. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>22. At the time of the survey it was observed that the front left hand side bedroom bathroom toilet paper holder was missing. This is not compliant with the rule for routine interior maintenance and proper toilet paper storage. Take the necessary steps to correct this deficiency.</p> <p>23. At the time of the survey it was observed that the front ramp hand rails had peeling paint. This is not compliant with the rule for routine exterior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>24. At the time of the survey it was observed that the right hand side center bedroom window pane was cracked. This is not compliant with the rule for routine exterior maintenance and safety. Take the necessary steps to correct this deficiency.</p>	C 174		

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C 174	<p>Continued From page 8</p> <p>25. At the time of the survey it was observed that there was dirt buildup on the vinyl siding and trim with cob web buildup. This is not compliant with the rule for routine exterior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>26. At the time of the survey it was observed that there were holes in the right hand side and rear corner soffit's. This is not compliant with the rule for routine exterior maintenance and could potentially allow rodent infiltration into the attic. Take the necessary steps to correct this deficiency.</p> <p>27. At the time of the survey it was observed that the left hand side upper exhaust vent cover was missing. This is not compliant with the rule for routine exterior maintenance and could potentially allow rodent entry. Take the necessary steps to correct this deficiency.</p>	C 174		
C 109	<p>Construction-Ceiling</p> <p>IV. The Building B. General Construction and Maintenance (10 NCAC 42C .2102) 6. The ceiling must be at least seven and one-half feet from the floor.</p> <p>This Rule is not met as evidenced by: 1. At the time of survey the following observations were made in reference to the homes ceiling heights, Family care home rules since 1971 have required that the minimum ceiling height is 7-1/2 feet from the floor; building codes required a ceiling height of 7'-6" until 2002 when it allowed</p>	C 109		

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C 109	Continued From page 9 the ceiling height to be a minimum of 7'-0" from the floor; it was observed that the ceiling height off of the rear hallway and staff bedroom measured 6'-5" from the floor and the rear exit door measured 5'-10 1/2" (code requires a minimum opening height of 80" or 6'-8"), this is not compliant with the rule, take action to correct the condition and forward verification of compliance to our office in the form of photo's and receipts/invoices of the work performed Note: This deficiency was previously cited during our 12/21/2021 biennial survey, no action has been taken to effectively correct this previously cited deficiency, take actions to maintain compliance.	C 109		
C 118	Bedrooms IV. The Building C. Physical Environment 4. Bedrooms (10 NCAC 42C .2205) a. There must be bedrooms sufficient in number and size to meet the individual needs according to age and sex of the residents, the administrator or supervisor-in-charge, other live-in staff and any other persons living in the home. Residents are not to share bedrooms with staff or other live-in non-residents. b. Only rooms authorized as bedrooms are to be used for resident ' s bedrooms. c. A room where access is through a bathroom, kitchen, or another bedroom will not be approved for a resident ' s bedroom. d. There must be a minimum area of 100 square feet, excluding vestibule, closets or wardrobe space, in rooms occupied by one person and one minimum area of 80 square feet per bed, excluding vestibule, closet or wardrobe space, in	C 118		

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C 118	<p>Continued From page 10</p> <p>rooms occupied by two or three persons.</p> <p>e. The total number of residents assigned to a bedroom must not exceed the number authorized for that particular bedroom.</p> <p>f. A bedroom may not be occupied by more than three residents.</p> <p>g. Each resident bedroom must be ventilated with window(s) and well lighted. The window area must be equivalent to at least eight percent of the floor space. The window(s) must be low enough to see outdoors from the bed and chair, with a maximum 36 inch sill height.</p> <p>h. Bedroom closets or wardrobes must be large enough to provide each resident with a minimum of 48 cubic feet of hanging clothing storage space (approximately two feet deep by three feet wide of hanging space by eight feet high).</p> <p>This Rule is not met as evidenced by:</p> <p>1. At the time of survey it was identified that the double occupancy bedroom located off of the living room only has an area of 144 sq. ft., this is not compliant with the rule, take action to correct the condition and forward verification of compliance to our office in the form of photo's and receipts/invoices</p> <p>Note: This deficiency was previously cited during our 12/21/2021 biennial survey, no action has been taken to effectively correct this previously cited deficiency, take actions to maintain compliance.</p>	C 118		