

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL012045	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 02/01/2024
NAME OF PROVIDER OR SUPPLIER PERKINS FAMILY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 2015 SUNNYSIDE DRIVE MORGANTON, NC 28655		
(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 Scott Greenwood</p> <p>DHSR Construction Section conducted a Biennial Survey on February 01, 2024 from 11:10 AM to 12:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 14, 2016 as a Family Care Home Six (6) ambulatory Residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the applicable portions of the 2012 North Carolina Building Code - Section 425.2 Residential Care Homes.</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	Continued From page 1 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; This Rule is not met as evidenced by: 1. At the time of the survey two live fire drills were performed. At the time six (6) residents were on-site. None of the residents responded or evacuated when the alarm was sounded. All residents remained seated in the dining room and or bedrooms. This is not compliant with the rule. Take the necessary steps to train the residents to respond or evacuate at the sound of the smoke alarms and any resident that requires physical or verbal prompting and or assistance needs to be relocated to another facility to better accommodate their needs.	C 102		
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 hallway night light was missing. This is not compliant with the rule for resident safety. Take the necessary to correct this deficiency.	C 142		
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT	C 174		

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C 174	<p>Continued From page 2</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:</p> <p>1. At the time of the survey it was observed that there was chipping paint on the exterior siding and trim all around the house. This is not compliant with the rule. Take the necessary steps to scrape the chipping paint and reapply as needed.</p> <p>Note: This deficiency cited during our 05/13/2022 biennial survey. no action has been taken to effectively correct the previously cited deficiency. Take action to maintain compliance.</p> <p>2. At the time of the survey it was observed that the exterior of the house was dirty and mildewed and the soffit areas had cobwebs all over. This is not compliant with the rule. Take the necessary steps to power wash the house.</p> <p>Note: This deficiency cited during our 05/13/2022 biennial survey. no action has been taken to effectively correct the previously cited deficiency. Take action to maintain compliance.</p> <p>3. At the time of the survey it was observed that the hallway ceiling light fixture globe was missing with old water stains on the ceiling. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>4. At the time of the survey it was observed that the main bedroom bathroom shower grab bar</p>	C 174		

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C 174	<p>Continued From page 3</p> <p>was missing, This is not compliant with the rule for resident safety. Take the necessary steps to correct this deficiency.</p> <p>5. At the time of the survey it was observed that there was a rusted heat vent in the hallway bathroom. 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 the hallway bathroom door had missing trim paint. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>7. At the time of the survey it was observed that the hot water tank thermostat access covers were missing. This is not compliant with the rule for routine interior maintenance and safety. Take the necessary steps to correct this deficiency.</p> <p>8. At the time of the survey bit was observed that there was lint buildup behind the clothes dryer. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to correct this deficiency.</p> <p>9. At the time of the survey it was observed that there was peeling paint at the window trim next to the washer and dryer. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency.</p> <p>10. At the time of the survey it was observed that the exterior clothes dryer vent cover was missing. This is not compliant with the rule for routine exterior maintenance and appearance. Take the</p>	C 174		

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C 174	Continued From page 4 necessary steps to correct this deficiency.	C 174		