

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL036035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/08/2025
NAME OF PROVIDER OR SUPPLIER WALDEN POND CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 101 OLDE COACH LANE CHERRYVILLE, NC 28021		
(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 Jonathan Gamsey</p> <p>DHSR Construction Section conducted a Biennial Survey on April 08, 2025 from 11:37 AM to 12:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on November 04, 1987 as a Family Care Home for six ambulatory Residents (able to evacuate and respond 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 1984 Minimum Standards and Regulations for Family Care Homes and the Applicable Portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1978 (87 revision) North Carolina State Building Code - Section 409.1g - 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 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</p>	C 105		

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

TITLE

(X6) DATE

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C 105	<p>Continued From page 1</p> <p>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 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:</p> <p>1.) At the time of the survey, it was communicated by staff that during fire drills they are prompting. This is not compliant with the rule due to the home being licensed for all ambulatory clients. Take the necessary steps to train the residents to respond and evacuate, without staff prompting or assistance, at any time the smoke detectors are activated. The residents must perform this task on their own for the home to maintain its ambulatory status.</p> <p>2.) At the time of the survey, it was observed that none of the four residents present in the house responded and evacuated at the time the smoke detectors were activated. The Residents did not respond, and none of them evacuated during the drill. This is not compliant with the rule due to the home being licensed for all ambulatory clients.</p>	C 105		

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C 105	Continued From page 2 Take the necessary steps to train the residents to respond and evacuate, without staff prompting or assistance, at any time the smoke detectors are activated. The residents must perform this task on their own for the home to maintain its ambulatory status.	C 105		
C 113	Construction-Door Width SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (j) The door width shall be a minimum of two feet and six inches in the kitchen, dining room, living rooms, bedrooms and bathrooms. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that the door to the bathroom attached to bedroom #3 is only 24 inches wide. This is not compliant with the rule. Take the necessary steps to submit plans to DHHSR on how it will adjust the door to meet the rule above. 2.) At the time of the survey, it was observed that the hallway bathroom door was only 24 inches wide. This is not compliant with the rule. Take the necessary steps to submit plans to DHHSR on how it will adjust the door to meet the rule above.	C 113		
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 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	C 146		

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C 146	Continued From page 3 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 rear ramp had a transition that did not provide a smooth transition. The transition starts at approximately 2 1/2 from grade. This is not compliant with the rule. Take the necessary steps to extend the ramp and handrails to the end of the ramp to meet the intent of the rule above.	C 146		
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 multiple windows throughout the facility's bedrooms are not staying open on their own. This could potentially impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair or replace windows as needed.	C 174		

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C 174	<p>Continued From page 4</p> <p>2.) At the time of the survey, it was observed that there was a sleeping room for the live-in staff in the kitchen. There was not a smoke detector outside this bedroom. This is not compliant with the rule. Take the necessary steps to install a smoke detector that is interconnected with the other hallway smoke detectors Outside the bedroom is a fire alarm strobe.</p> <p>3.) At the time of the survey, it was observed that the front handrail was loose. This is not compliant with the rule. Take the necessary steps to repair or replace the handrail.</p> <p>4.) At the time of the survey, it was observed that the texture ceiling above the kitchen range was peeling and chipping. This is not compliant with the rule. Take the necessary steps to repair the ceiling.</p> <p>5.) At the time of the survey, it was observed that the oven exhaust bulb did not have a bulb cover to prevent the bulb from shattering into food. This is not compliant with the rule. Take the necessary steps to install a globe cover for the kitchen range bulb.</p> <p>6.) At the time of the survey, it was observed that the evacuation plans were not oriented on the walls correctly. This is not compliant with the rule. Take the necessary steps to orient the plans correctly.</p> <p>7.) At the time of the survey, it was observed that throughout the facility the high touch points need to be painted. This is not compliant with the rule. Take the necessary steps to paint high touch points throughout the facility.</p> <p>8.) At the time of the survey, it was observed that</p>	C 174		

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C 174	Continued From page 5 the door in the kitchen that exits to the exterior of the facility requires special knowledge to open the door. This is not compliant with the rule. Take the necessary steps to repair the doorknob or replace it.	C 174			