STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL032096	A. BUILDING: **01** B. WING _____	R **03/11/2016**

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JONES FAMILY HOME	**2122 OVERLAND DRIVE** **DURHAM, NC 27704**

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{C 000}	Initial Comments Report by Suzanna Fay and Glenn Hoppin DHSR Construction Section conducted a Biennial Follow-up Survey on March 11, 2016 from 9:28 AM to 10:10 AM at the above referenced facility. Not all of the previously cited deficiencies were corrected and one new deficiency was cited. Therefore, further action is required. The remaining deficiencies are as follows:	{C 000}		
{C 109}	Construction-Two Stories SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (f) If the building is two stories in height, it shall meet the following requirements: (1) Each floor shall be less than 2500 square feet in area if existing construction or, if new construction, shall not exceed the allowable area for R-4 occupancy in the North Carolina State Building Code; (2) Aged or disabled persons are not to be housed on any floor above or below grade level; (3) Required resident facilities are not to be located on any floor above or below grade level; and (4) A complete fire alarm system with pull stations on each floor and sounding devices which are audible throughout the building shall be provided. The fire alarm system shall be able to transmit an automatic signal to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. This Rule is not met as evidenced by:	{C 109}		

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{C 109}	Continued From page 1 1. Observations revealed that the facility is utilizing the basement level for staff living/sleeping. Previous surveys cited that the facility did not meet the requirements of a two-story facility and staff could not utilize this level because it did not comply with .0302 (f)(4) it did not have a alarm system in place with pull stations on each level that is monitored. At the time of this survey, switches had been installed at each level that went to a separate alarm that was audible throughout the facility. However, the switches are not pull stations and the system was not monitored by an outside entity, nor did it send a signal directly to the fire department. Have a qualified technician install acceptable pull stations and install an alarm system that meets the requirements of this rule. Provide documentation of the repairs through copies of receipts or work orders. 03/11/2016: SF/GH-At the time of this survey, the switches were still installed and operable. An acceptable monitored fire alarm system with pull stations on each level had not been installed. The living area downstairs had been disassembled and the furniture appeared to be stored and not used. Interview with Staff revealed that she no longer was using the lower level as a Staff area. The room previously used as the Staff bedroom was locked and Staff did not have a key. Provide a monitored fire alarm system with pull stations at each level or verify that the lower level is no longer being used by Staff. Provide documentation of the correction in the form of photos, receipts, permits or work orders.	{C 109}		
{C 148}	Outside Entrances/Exits-Free of Obstructions	{C 148}		

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{C 148}	Continued From page 2 SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (e) All entrances/exits shall be free of all obstructions or impediments to allow for full instant use in case of fire or other emergency. This Rule is not met as evidenced by: 2. Observations revealed safety catches on the windows in Bedroom #1 and in Bedroom #2 which could deter prompt exiting from the windows in the case of an emergency. Have a qualified person remove or disable the safety catches to allow the windows to open easily. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the safety catches had not been removed or disabled. Have a qualified person remove or disable the safety catches to allow the windows to open easily. Provide documentation of the repairs through photos or copies of receipts or work orders.	{C 148}		
{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. Observations revealed that the corridor floor did not have a wall base and the rough edges of the floor finish were exposed. Have a qualified technician install a floor base in the hall. Provide	{C 152}		

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{C 152}	Continued From page 3 documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that this item has not been corrected. Have a qualified technician install a floor base in the hall. Provide documentation of the repairs through photos or copies of receipts or work orders.	{C 152}		
{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: 2. Observations revealed that the base and the vinyl floor behind the sink in the bathroom near the kitchen was pulling away from the wall. Have a qualified technician repair the floor and secure the base. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that this item has not been corrected. Have a qualified technician repair the floor and secure the base. Provide documentation of the repairs through photos or copies of receipts or work orders.	{C 153}		

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{C 165}	Continued From page 4	{C 165}		
{C 165}	Bedroom Furnishings- Light Overhead or Lamp SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (8) a light overhead of bed with a switch within reach of person lying on bed; or a lamp. The light shall provide a minimum of 30 foot-candle power of illumination for reading. (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1. Observations revealed that there were no working lights in Bedroom #3. There were a couple of lamps that were either not plugged in or had missing bulbs. The wall lamps were not working at the time of this survey. Have a qualified technician repair the wall hung fixtures and provide adequate lighting for the bedroom. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the wall sconces were not working. The bedside lamps were working. Have a qualified technician repair the wall hung fixtures to provide adequate lighting for the bedroom (30 foot candles of light at floor level.) Provide documentation of the repairs through photos or copies of receipts or work orders.	{C 165}		
{C 174}	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING	{C 174}		

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{C 174}	Continued From page 5 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. Observations revealed that several of the kitchen cabinet drawer fronts were damaged or missing. Missing drawer fronts were to the left of the stove and to the left of the washer and dryer. The top drawer to the right of the stove was damaged. Have a qualified technician repair and replace the drawer fronts. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the kitchen drawers had not been repaired. Two drawer fronts were missing and the finish was peeling off one of the drawer fronts to the left of the refrigerator. Have a qualified technician repair and replace the drawer fronts. Provide documentation of the repairs through photos or copies of receipts or work orders. 2. Observations revealed the cabinet doors under the kitchen sink were not hanging correctly. Have a qualified technician repair the cabinet doors. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed the cabinet doors under the kitchen sink were still not hanging correctly. Have a qualified technician repair the cabinet doors. Provide documentation	{C 174}		

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{C 174}	Continued From page 6 of the repairs through photos or copies of receipts or work orders. 6. Observations revealed that a section of the trim at the attic access door had broken off leaving a hole in the kitchen ceiling. Have a qualified technician repair the hatch opening. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the trim was missing at both ends of the access ladder. Have a qualified technician repair the hatch opening. Provide documentation of the repairs through photos or copies of receipts or work orders. 7. Observations revealed that the handle to the storm door at the kitchen exit was broken. Have a qualified technician repair the door. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the handle to the storm door at the kitchen exit was still broken. Have a qualified technician repair the door. Provide documentation of the repairs through photos or copies of receipts or work orders. 9. At the time of this survey, the smoke detector in Bedroom #1 did not sound when sprayed with canned smoke. Have a qualified technician repair or replace the smoke detector. Provide documentation of the repairs through copies of receipts or work orders. 03/11/2016: SF/GH-At the time of this survey, the smoke detector in Bedroom #1 sounded, but it was chirping indicating a low battery. Interview	{C 174}		

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{C 174}	Continued From page 7 with Staff revealed that the battery had been replaced. Install a new battery and if the smoke detector is still chirping, replace the smoke detector. 11. Observations revealed that the door knob was broken off of the closet door in Bedroom #3. Have a qualified technician install a door knob. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-At the time of this survey, the closet door still did not have a door knob. Have a qualified technician install a door knob. Provide documentation of the repairs through photos or copies of receipts or work orders. 14. Observations revealed that the flanges around the shower head, the shower knob and the hot water knob were loose and no longer secure to the tub surround which will allow moisture to penetrate the surround. Have a qualified technician repair the tub fixtures. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that this item has not been completed. Have a qualified technician repair the tub fixtures. Provide documentation of the repairs through photos or copies of receipts or work orders. 17. Observations revealed that the double doors leading from the Staff living area to the driveway were framed with OSB board. The board is unfinished and is rotting along the bottom of the doors. The door trim is also rotting along the bottom edges. Have a qualified technician repair the framing and trim at the exit doors. Provide documentation of the repairs through photos or	{C 174}		

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{C 174}	Continued From page 8 copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the boards and trim have not been repaired or painted. Have a qualified technician repair the framing and trim at the exit doors. Provide documentation of the repairs through photos or copies of receipts or work orders. 18. Observations revealed a section of the exterior siding above the rear kitchen exit is loose and has pulled away from the wall. Have a qualified technician repair the siding. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that the siding is still hanging loose. Have a qualified technician repair the siding. Provide documentation of the repairs through photos or copies of receipts or work orders. 19. Observations revealed cracks in the foundation block at the exterior wall of the facility outside the kitchen. Have a qualified technician repair the foundation wall. Provide documentation of the repairs through photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that this item has not been repaired. Have a qualified technician repair the foundation wall. Provide documentation of the repairs through photos or copies of receipts or work orders. 20. Observations revealed that the foundation vent is out where the plumbing lines emerge outside the kitchen side wall. Have a qualified technician install a vent to secure the opening. Provide documentation of the repairs through	{C 174}		

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{C 174}	Continued From page 9 photos or copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that this item has not been corrected. Have a qualified technician install a vent to secure the opening. Provide documentation of the repairs through photos or copies of receipts or work orders. 21. At the time of this survey, the exterior GFCI outlet at the right wall of the front porch did not have power. Have a qualified technician repair or replace the outlet. Provide documentation of the repairs through copies of receipts or work orders. 03/11/2016: SF/GH-Observations revealed that this outlet has not been repaired and the box is very loose. Have a qualified technician repair or replace the outlet. Provide documentation of the repairs through copies of receipts or work orders. New Deficiency: 1. At the time of the Follow Up Survey, the smoke detector at the bottom of the stair and the smoke detector in the laundry room did not have batteries and were chirping. Install batteries and insure the smoke detectors are working properly.	{C 174}		
{C 179}	Building Service Equipment-Night Lights SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (e) All resident areas shall be well lighted for the safety and comfort of the residents. The minimum lighting required is: (3) 1 foot-candle power at the floor for corridors at night.	{C 179}		

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{C 179}	Continued From page 10 (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. Observations revealed that the facility did not have night lights in the corridors. Interview with Staff indicated that the hall light stayed on during the night. Install night lights in the corridors or areas outside the bathrooms to provide visibility at night. Provide documentation of the repairs through photos or copies of receipts. 03/11/2016: SF/GH-Observations revealed that the corridor did not have night lights. Night lights were installed in the bedrooms and the corridor does have a working electrical outlet. Install nightlight(s) in the corridors where possible. Provide documentation of the repairs through photos or copies of receipts.	{C 179}		
{C 180}	Building Service Equipment-Call System SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (f) Where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that it can be activated with a single action and remain on until deactivated by staff. The call system activator shall be within reach of resident lying on his bed. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by:	{C 180}		

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{C 180}	Continued From page 11 1. At the time of this survey, there was a Staff bedroom downstairs. Interview with Staff revealed that the facility does not have 24 hour awake Staff. Therefore, the facility is required to have a call system in place that meets the requirements of this rule. Have a qualified technician install a call system at each Resident bed that sounds to a control panel in the Staff room or verify that the facility has 24 hour awake Staff. Provide documentation of the repairs through copies of receipts or work orders. 03/11/2016: SF/GH-At the time of this survey, the Staff bedroom door was locked and verification could not be made that there was 24 hour awake Staff. Allow access to the downstairs room at the follow up survey or install a call system. Provide documentation of the repairs through copies of receipts or work orders.	{C 180}		