

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>FCL040006</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: <b>01</b><br><br>B. WING: _____ | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><b>01/27/2016</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>CARRIE'S FAMILY CARE HOME</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1025 POPE FARM ROAD<br/>STANTONSBURG, NC 27883</b> |
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| (X4) ID<br>PREFIX<br>TAG | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ID<br>PREFIX<br>TAG | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY)                                                                                                                                                                                                                                       | (X5)<br>COMPLETE<br>DATE |
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| C 000                    | Initial Comments<br><br>Report by Glenn Hoppin<br><br>DHSR Construction Section conducted a biennial Survey on January 27, 2016 beginning at 10:30am and Ending at 12:00am at the above referenced facility. DHSR records indicate the home was first licensed on January 07, 2009 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 2005 Rules 10A NCAC 13G for Family Care Homes, and the 2006 North Carolina State Building Code - Section 421.2 - Residential Care Homes.<br><br>At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows: | C 000               | <i>The facility did not receive the SDO until May 26, 2016 which puts us at a disadvantage of correcting the deficiencies within the specified time. The SDO was requested several times by the SIC, but to no avail.</i>                                                                                                                                      | 5/26/16                  |
| C 130                    | Bedrooms-Windows<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0308 BEDROOMS<br>(g) Each resident bedroom must have one or more operable windows and be lighted to provide 30 foot candles of light at floor level. The window area shall be equivalent to at least eight percent of the floor space. The windows shall have a maximum of 44 inch sill height.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the windows in the staff quarters are higher than 44 inches above the floor. Consult with your local building official to determine what course of action is required. Provide copies of all permits, approvals, and any                                                                                                                                            | C 130               | <i>The facility contractor contacted a certified building inspector that researched this rule. He reported that in a Family Care Home and per the North Carolina Building Code, all sleeping rooms must have a window. If the room in question has an exterior door that leads to the outside of the home, the window does not have to be 44" sill height.</i> | 5/27/16                  |

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Leyschia Patterson*

TITLE  
*ADM*

(X6) DATE

*5/28/16*



Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**CARRIE'S FAMILY CARE HOME**

**1025 POPE FARM ROAD  
STANTONSBURG, NC 27883**

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| C 130                    | Continued From page 1<br><br>other correspondence pertaining to this deficiency to the DHSR Construction Section.<br><br>2. Observations revealed that the windows in the front resident bedroom adjacent to the front door are blocked by furniture. Move the furniture so that at least one operable window is accessible for emergency egress. Provide photo documentation to the DHSR Construction Section.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | C 130               |                                                                                                                                                       |                                                                      |
| C 174                    | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT<br>(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.<br>(j) This Rule shall apply to new and existing family care homes.<br><br>This Rule is not met as evidenced by:<br>1. Observations revealed that the smoke detector in the staff bedroom was not interconnected with the other smoke detectors. Have a qualified technician repair or replace the smoke detector. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>2. Observations revealed that the GFCI receptacle to the left of the stove had no power. Have a qualified technician repair or replace the empowered GFCI Receptacle. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>3. Observations revealed that the faucet in the | C 174               | <i>The electrician interconnected the smoke detectors</i><br><br><br><br><br><br><br><br><br><br><i>The electrician repaired the GFCI receptacle.</i> | <i>1/29/16</i><br><br><br><br><br><br><br><br><br><br><i>1/29/16</i> |

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| C 174                    | Continued From page 2<br><br>kitchen is broken. Have a qualified technician repair or replace the faucet. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>4. Observations revealed that the handrail is loose on the front porch. Have a qualified technician repair the loose handrail. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>5. Observations revealed that the doorknob on the right side front door is damaged. Have a qualified technician repair or replace the doorknob. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>6. Observations revealed that the floor in the hall bathroom is soft around the toilet. Have a qualified technician repair or replace the soft floor. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>7. Observations revealed that the bathtub in the hall bath room needs to be recaulked. Have a qualified technician caulk the bathtub. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>8. Observations revealed that some of the floor molding in the hall bathroom is rotted and requires painting. Have a qualified technician repair and paint the bathroom floor molding as necessary. Provide invoices and receipts to the DHSR Construction Section when this repair is complete.<br><br>9. Observations revealed that the faucet in the | C 174               | <i>The hand rail was repaired and is secure.</i><br><br><i>The doorknob was replaced</i><br><br><i>The floor in the Hall bathroom is stable.</i><br><br><i>The bathtub was recaulked.</i><br><br><i>The floor molding was repaired and painted.</i> | <i>2/3/16</i><br><br><i>2/3/16</i><br><br><i>2/3/16</i><br><br><i>2/3/16</i> |



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| C 174                    | Continued From page 3<br><br>hall bath room has a loose handle. Have a qualified technician repair or replace the faucet. Provide invoices and receipts to the DHHS Construction Section when this repair is complete.<br><br>10. Observations revealed some rotted decking on the rear deck and handicap ramp. Have a qualified technician repair or replace the affected decking. Provide invoices and receipts to the DHHS Construction Section when this repair is complete.<br><br>11. Observations revealed damaged or missing window screens on the exterior of the facility. Repair or replace all damaged or missing window screens. Provide invoices and receipts to the DHHS Construction Section when this repair is complete.<br><br>12. Observations revealed a large wasp nest on the left side of the facility. Remove the wasp nest. Provide photo documentation to the DHHS construction section when complete.<br><br>✓ 13. Observations revealed that the rain gutter next to the fireplace chimney is damaged. Have a qualified technician repair or replace the damaged gutter.<br><br>14. Observations revealed that the picnic table used by the residents has a damaged leg. Repair or remove the damaged picnic table. Provide documentation to the DHHS Construction Section when this is complete.<br><br>15. Observations revealed mildew and fading paint on the fascia and soffit of the facility. Have a qualified technician clean and paint the fascia and soffit as necessary. Provide invoices and | C 174               | <i>The faucet was repaired.</i><br><br><i>The rotted decking was replaced on the rear deck &amp; handicap ramp.</i><br><br><i>The window screens have been ordered and will be replaced upon receipt.</i><br><br><i>Staff was unable to locate a wasp nest.</i><br><br><i>The gutter was ordered and will be replaced upon receipt.</i><br><br><i>The picnic table leg was repaired.</i><br><br><i>The facility exterior is scheduled for pressure washing 6/10/16</i> | <i>2/3/16</i><br><br><i>2/6/16</i><br><br><i>5</i><br><br><i>2/6/16</i><br><br><i>6/10/16</i> |

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| C 174                    | Continued From page 4<br><br>receipts to the DHSR Construction Section when<br>this repair is complete.                      | C 174               | <p><i>The SIC will report repairs<br/>needed to the facility contractor<br/>within 24 hours. The items that<br/>need to be repaired will be documented<br/>on the facility repair log and<br/>faxed to the Administrator.<br/>The Administrator will ensure<br/>that the repairs are completed<br/>within one week after the<br/>facility contractor is notified.</i></p> | <i>5/27/16</i>           |