

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL074041	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/30/2016
NAME OF PROVIDER OR SUPPLIER CLEMMIE'S FAMILY CARE HOME II		STREET ADDRESS, CITY, STATE, ZIP CODE 110 PEARL DR GREENVILLE, NC 27834		
(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	Initial Comments Report by Suzanna Fay DHSR Construction Section conducted a Biennial Survey on August 30, 2016 from 11:23 AM to 12:45 PM at the above referenced facility. DHSR records indicate the home was first licensed on April 16, 2013 as a Family Care Home for three ambulatory Residents. The facility had an increase in capacity on May 6, 2014 to four 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 for Family Care Homes 10A NCAC 13G, and the 2012 North Carolina State Building Code - Section 421.2 - Residential Care Homes. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (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. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have a current Fire Inspection. Confirmation was made with the local Fire Inspector that the facility would be inspected Thursday, September 1, 2016. Provide a copy of his inspection report to DHSR/Construction Section with your signed	C 117		

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

TITLE

(X6) DATE

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C 117	Continued From page 1 Plan of Corrections.	C 117		
C 130	Bedrooms-Windows SECTION .0300 - THE BUILDING 10A NCAC 13G .0308 BEDROOMS (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. This Rule is not met as evidenced by: 1. Observations revealed that the windows in Bedroom 2 were painted shut and could not be opened. Clean and tool the windows so that they will open. Provide documentation of the repairs in the form of photos.	C 130		
C 148	Outside Entrances/Exits-Free of Obstructions 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: 1. At the time of this survey, it was observed that the hall door separating the dining room from the front entry had locking hardware that, if engaged, would block the front exit and the door hardware was loose. Have a qualified technician replace the door hardware with a passage set. Provide documentation of the repairs in the form of photos, receipts or work orders.	C 148		

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C 150	Continued From page 2	C 150		
C 150	Outside Entrances/Exits-Wanderers, Alarms SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (g) In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each exit door for resident use shall be equipped with a sounding device that is activated when the door is opened. The sound shall be of sufficient volume that it can be heard by staff. If a central system of remote sounding devices is provided, the control panel for the system shall be located in the bedroom of the person on call, the office area or in a location accessible only to staff authorized by the administrator to operate the control panel. This Rule is not met as evidenced by: 1. At the time of this survey, the facility has a security panel in the foyer that is linked to the doors and windows. The system was not active. Have the system reactivated. Provide documentation of the repairs in the form of receipts.	C 150		
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:	C 174		

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C 174	Continued From page 3 1. Observations revealed that the screen was damaged at the screen door to the carport. Have a qualified technician repair or replace the door. Provide documentation of the repairs in the form of photos, receipts or work orders. 2. Observations revealed that the kitchen drawer to the right of the sink was damaged. Also observed that the bottom edge trim on the base cabinets was falling off and the doors would not close properly. Have a qualified technician repair the kitchen cabinets. Provide documentation of the repairs in the form of photos, receipts or work orders. 3. Observations revealed that the laminate edgeband on the hall bath sink was pulling away from the sink. Have a qualified technician repair the laminate. Provide documentation of the repairs in the form of photos, receipts or work orders. 4. Observations revealed that the sink in the hall bath was draining very slowly. Have the sink unclogged so that it will drain. Provide documentation of the repairs in the form of photos, receipts or work orders. 5. Observations revealed that the exhaust fans in both bathrooms had an accumulation of dust. Sweep or vacuum out the fans so that they will vent properly. Provide documentation of the repairs in the form of photos. 6. Observations revealed that the tub faucet in the master bath was running a steady stream of water. Have a qualified technician repair the faucet so that it no longer drips. Provide documentation of the repairs in the form of receipts or work orders.	C 174		

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C 174	Continued From page 4 7. Observations revealed that the heat detector in the attic had fallen off of the base. Secure the heat detector to provide fire protection for the attic. Provide documentation of the repairs in the form of photos.	C 174		
C 177	Building Service Equipment-Hot Water SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (d) The hot water tank shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. The water temperature at the time of this survey was 125 degrees Fahrenheit. Adjust the thermostat on the hot water heater to be between 100 and 116 degrees. Monitor the water temperature three times a day for three days. Record your findings on the Hot Water Temp Log left at the facility. Return the log to DHSR/Construction Section with your signed Plan of Corrections.	C 177		
C 183	Outside Premises-Clean, Safe SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (a) The outside grounds of new and existing family care homes shall be maintained in a clean	C 183		

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C 183	Continued From page 5 and safe condition. This Rule is not met as evidenced by: 1. Observations revealed that the second to last board on the front entry ramp was loose and poses a tripping hazard. Have the board secured. Provide documentation of the repairs in the form of photos, receipts or work orders. 2. Observations revealed two active wasp nests near the front entry. One was in the corner of the front porch outside the front door and one was on the soffit to the right of the front porch. Remove the nests and treat for wasps if necessary. Provide documentation of the repairs in the form of photos or receipts. 3. Observations revealed that the crawl space vent to the left of the kitchen window was damaged leaving an opening for pests to enter the crawl space. Have a qualified technician replace the vent. Provide documentation of the repairs in the form of photos, receipts or work orders. 4. Observations revealed that the crawl space door was heavily damaged. Have a qualified technician replace the crawl space door. Provide documentation of the repairs in the form of photos, receipts or work orders.	C 183		