

PRINTED: 09/23/2016
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL064006	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 06/01/2016
NAME OF PROVIDER OR SUPPLIER KNIGHT'S FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3305 GREENFIELD DRIVE ROCKY MOUNT, NC 27804		
(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 June 1, 2016 from 10:15 AM to 11:35 AM at the above referenced facility. DHSR records indicate the home was first licensed on June 14, 1996 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 1992 Family Care Homes Rules T10: 42C, applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1996 North Carolina State Building Code - Section 419.2 - 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 a copy of the current Fire Inspection Report could not be located. Provide a copy of the most recent Fire Inspection Report to DHSR/Construction Section with your signed Plan of Corrections and make sure a copy is maintained at the facility.	C 117	Have obtain a copy of Fire Report As of June 02, 2016 * note - that Fire Inspection are Electronically done + no Paper copy	6-02-2016

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

TITLE

(X6) DATE

STATE FORM

0099

7NLC21

If continuation sheet 1 of 6

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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. Observations revealed that the smoke detector in the Staff office was giving off a beeping sound and when tested, it sounded at a very low decibel. Have a qualified technician replace the smoke detector. Provide documentation of the repairs in the form of receipts or work orders. 2. Observations revealed that the kitchen outlet to the right of the stove did not trip when tested. Have a qualified technician repair or replace the outlet. Provide documentation of the repairs in the form of receipts or work orders. 3. Observations revealed that the kitchen exhaust hood was not secure. Adjust and secure the kitchen range hood. Provide documentation of the repairs in the form of photos, receipts or work orders. 4. Observations revealed that a green, painted finish had been applied to the kitchen countertops. The finish is deteriorating and about a third of the paint has worn off. Have a qualified technician repair or replace the kitchen countertops. Provide documentation of the repairs in the form of photos, receipts or work orders.	C 174	<i>Smoke detector has been replaced</i> <i>Kitchen outlet has been repaired</i> <i>Kitchen exhaust hood SECURE</i>	9-30-16 9-30-16 9-30-16

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C 174	Continued From page 2 orders. 5. Observations revealed large yellow stains on the ceiling outside of the laundry room. Have a qualified technician repair any leaks and paint the ceiling. Provide documentation of the repairs in the form of photos, receipts or work orders. 6. Observations revealed that the tub may have settled in the hall bath. The caulking has come out at the edge of the tub and the wall tile is cracked between the tub and toilet. Have a qualified technician investigate for any structural issues and make the necessary repairs to the floor and wall. Provide documentation of the repairs in the form of photos, receipts or work orders. 7. Observations revealed that three of eight door knobs were missing from closet doors. One was missing from the left door in Bedroom #2 and both of the knobs were missing from the lefthand closet in Bedroom #1. Replace the door knobs. Provide documentation of the repairs in the form of photos, receipts or work orders. 8. Observations revealed that the sink in Bath #1 was clogged. Have a qualified technician repair the sink so that it drains. Provide documentation of the repairs in the form of receipts or work orders. 9. Observations revealed that the lens cover was missing from the overhead light in the toilet area of Bath #1. Install a lens cover. Provide documentation of the repairs in the form of photos, receipts or work orders. 10. Observations revealed that the door at the den exit was sticking and difficult to open. Have	C 174	Ceiling has been Painted Will have Repairs Done by 10-30-16 Doors has been Replaced Drain Sink drain Unclogged Replaced Cover on Light Door has been Repaired	9-30-16 10-30-16 9-30-16 9-30-16 10-30-16 9-5-16

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C 174	Continued From page 3 a qualified technician repair the door. Provide documentation of the repairs in the form of receipts or work orders. 11. Observations revealed that the exterior stucco finish was damaged in several places. Damage was observed on the wall outside of the laundry room, at the right corner outside of Bedroom #2 and around the HVAC unit outside of Bedroom #3. Have a qualified technician repair the damaged finish. Provide documentation of the repairs in the form of photos, receipts or work orders. 12. Observations revealed that the exterior window trim at Bedroom #3's window was rotting and damaged. Have a qualified technician replace the damaged trim. Provide documentation of the repairs in the form of photos, receipts or work orders. 13. Observations revealed that the wiring was "open neutral" at the exterior outlet at the front entrance. Have a qualified technician repair the neutral wiring. Provide documentation of the repairs in the form of receipts or work orders.	C 174	Repairs will be done by 10-30-16 Repairs will be done by 10-30-16 Has been Repaired 6-30-16	10-30-16 10-30-16 6-30-16
C 138	Outside Entrances/Exits-Single Hand Motion T10: 42C .2209 OUTSIDE ENTRANCES AND EXITS (d) All exit doors locks must be easily operable, by a single hand motion, from the inside at all times without keys.	C 138		

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C 138	Continued From page 4 This Rule is not met as evidenced by: 1. Observations revealed that the door hardware at the den exit and at the living room side exit were not single action. Have a qualified technician replace the door hardware with single action hardware. Provide documentation of the repairs in the form of receipts or work orders.	C 138	Replaced door hardware by 10-30-16	
C 140	Outside Entrances/Exits-Handrails T10: 42C .2209 OUTSIDE ENTRANCES AND EXITS (f) All steps, porches, stoops and ramps must be provided with handrails and guardrails. This Rule is not met as evidenced by: 1. At the time of this survey, it was observed that the front steps from the living room foyer did not have handrails. As this exit does not appear to be used, a waiver may have been granted. Provide documentation of any waivers or equivalencies issued for this exit or have a qualified technician install handrails at the front steps. Provide documentation of the repairs in the form of photos, receipts or work orders.	C 140	Waiver was given in 1996 - Ramp was built to side entrance b/c front entrance was not used by residents	
C 143	Floors T10: 42C .2211 FLOORS (a) All floors must be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs are not to be used. (c) All floors must be kept in good repair. This Rule is not met as evidenced by: 1. Observations revealed that the floor at the den	C 143		

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C 143	Continued From page 5 entrance was soft and spongy and the tile around the door was cracked and loose. Have a qualified technician repair the damaged floor as required to provide a firm and safe surface. Provide documentation of the repairs in the form of photos, receipts or work orders. 2. Observations revealed that the vinyl floor tiles in Bedroom #1 were chipped and damaged between the right bed and the wall. Have a qualified technician repair or replace the flooring. Provide documentation of the repairs in the form of photos, receipts or work orders.	C 143	the tile will be replaced by 10-30-16 Flooring Repaired 10-30-16 by	
C 159	Fire Safety-Fire Rehearsals T10: 42C .2213 FIRE SAFETY EQUIPMENT (e) There must be at least four rehearsals of the fire and disaster plan each year. Records of rehearsals are to be maintained and copies furnished to the county department of social services annually. The records must include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved. This Rule is not met as evidenced by: 1. Review of Records revealed that a copy of the Fire Drill Log was not available for review. Provide a copy of the fire rehearsals for the last year to DHSR/Construction Section with your signed Plan of Corrections.	C 159	All Fire drills are done and up to date As of 6-30-16 6-30-16	