STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL017038	A. BUILDING: **01** B. WING _____	**07/28/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BEVERLY RUCKER FAMILY CARE HOME # 9	**6912 NC HWY 150** **REIDSVILLE, NC 27320**

(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 Glenn Hoppin DHSR Construction Section conducted a Biennial Survey on July 28, 2017 at the above referenced facility. DHSR records indicate the home was first licensed on December 4, 1990 as a Family Care Home for six (6) 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 "Rules for Family Care Homes minimum and desired standards and regulations" with 1987 revisions, the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, the 1978 (Rev 10) North Carolina State Building Code - Section 409.1(g) - Residential Care Facilities. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
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). The rule requires the facility to maintain the electrical, mechanical and water systems in a manner that ensures the physical safety of	C 174		

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C 174	Continued From page 1 clients, staff and visitors. 1. Observations revealed furniture blocking the windows in bedroom #1 and #2. Effect: This could impede emergency egress in the event of a fire or emergency. Directive: Relocate the furniture so that at least one operable window is available for emergency egress in every bedroom. Provide the DHSR Construction Section with documentation verifying that this item has been completed. 2. Observations revealed that there is mold growing on the exterior of the facility. Effect: This is unsightly and does not meet the intent of a clean and neat appearance. Directive: Have a qualified technician pressure wash the facility. Provide the DHSR Construction Section with documentation verifying that this item has been completed. 3. Observations revealed that the bathroom floor in the hall bath outside of bedroom 2 is soft. Effect: A soft floor is an indication of rotted wood. This is a safety hazard for residents and staff. Directive: Have a qualified technician make all necessary repairs. Provide the DHSR Construction Section with documentation verifying that this repair has been completed. 4. Observations revealed that the toilet in the hall bath is loose. Effect: The seal on the bottom of the toilet could	C 174		

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C 174	Continued From page 2 leak causing floor damage. Directive: Have a qualified technician make all necessary repairs. Provide the DHSR Construction Section with documentation verifying that this repair has been completed. 5. The smoke detectors were beeping due to a low battery condition. Effect: With a low battery the smoke detectors would not work in the event of a power failure. Directive: Have a qualified technician make all necessary repairs. Provide the DHSR Construction Section with documentation verifying that this repair has been completed. 6. Observations revealed that the fire extinguisher inspection tags are out of date. Effect: Failure to have the fire extinguishers inspected as required is a safety hazard. Directive: Have a qualified technician inspect the fire extinguishers and place a current inspection tag on them. Provide the DHSR Construction Section with documentation verifying this repair has been completed. 7. Observations revealed that the dryer duct was damaged and venting behind the dryer. Effect: This is a fire hazard. Directive: Have a qualified technician inspect the fire extinguishers and place a current inspection tag on them. Provide the DHSR Construction Section with documentation verifying this repair has been completed.	C 174		

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C 174	Continued From page 3 8. Observations revealed the rear handicap ramp does not discharge to grade. Effect: This is a potential trip hazard. Directive: Have a qualified technician bring the handicap ramp to grade. Provide documentation to the DHSR Construction Section verifying this repair has been completed.	C 174		
C 122	Corridor IV. The Building C. Physical Environment 7. Corridor (10 NCAC 42C .2208) a. Corridors must be a minimum clear width of three feet. b. Corridors must be lighted sufficiently with night lights providing 1 foot-candle power at the floor. c. Corridors must be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1). The rule requires the corridors to be lighted sufficiently with night lights providing 1 foot-candle power at the floor. Findings: Observations revealed that the facility had no night lights at the time of the survey. Effect: This is a safety hazard for residents. Directive: Have a qualified technician install night lights in accordance with the above mentioned rule. Provide the DHSR Construction Section with documentation verifying this has been	C 122		

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C 122	Continued From page 4 completed.	C 122		