DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

MARK PAYNE
DIRECTOR

SECOND NOTICE

October 17, 2017

Carrie Dudley-(via e-mail only)
P O Box 2503
Kinston, NC 28502

RE: Barnes Family Care Home - FC Biennial Construction Survey
1106 East Caswell Street
Kinston Lenoir County
FID #960038 Fcl054061

Dear Ms. Dudley:

The Division of Health Service Regulation (DHSR) - Construction Section conducted a Biennial Survey of your facility on July 13, 2017. This survey was conducted by . As a result of this survey, deficiencies were cited which required an acceptable Plan of Correction that was to be returned to our office by October 5, 2017.

As of the date of this letter, the Construction Section has not received your Plan of Correction. Enclosed is a copy of the letter and Statement of Deficiencies that was mailed or emailed to you.

You will need to type or print clearly your correction action and then **SIGN, DATE AND RETURN** the Plan of Correction to DHSR-Construction by November 1, 2017. Failure to return the signed Plan of Correction within this time period could potentially cause a suspension of admissions, provisional license or license revocation. The Provider may copy form(s) to be retained for your files.

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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL054061	A. BUILDING: 01 B. WING _____	07/13/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BARNES FAMILY CARE HOME	1106 EAST CASWELL STREET KINSTON, NC 28502

(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 Anthony Brinson DHSR Construction Section conducted a Biennial Survey on July 13, 2017 from 8:30 AM to 9:44 AM at the above referenced facility. DHSR records indicate the home was first licensed on January 02, 2008 as a Family Care Home for six (6) ambulatory Residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: The 1992 "Family Care Home T 10 : 42C and the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2002 North Carolina State Building Code - 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 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 building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition".	C 174		

10/19/2017

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C 174	Continued From page 1 Findings: It was observed at the time of survey that both of the handrails on either side of the ramp are loose and wont support the minimum weight load requirements as required by code. Effect: Being loose and unsecured can result in a fall incident which can cause injury to both residents, staff or visitors. Possible effects from a fall are the potential to break bones, cause concussions or even death. Directive: Consult with a qualified technician to secure the handrails and eliminate the potential risk of injury to those it can effect, once completed provide copies of receipts/invoices of any work needed to create repairs. 2.) The rule requires "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". Findings: It was observed at the time of survey that several boards near the point of discharge from the ramp were loose and not providing secure footing. Effect: Being loose and unsecured can result in a potential trip hazard which can cause injury to both residents, staff or visitors. Possible effects from a fall are the potential to break bones, cause	C 174	Corrected Handrails secured Corrected boards secured Near point of discharged	10/19/17 10/19/17

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C 174	Continued From page 2 concussions or even death. Directive: Consult with a qualified technician to ensure that the boards in question and all other boards are secure and in place to eliminate any potential risk of injury, once completed provide copies of receipts/invoices of any work needed to perform the repairs. 3.) The rule requires "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". Findings: It was observed at the time of survey that the downspout located at the rear of the home on the attached carport has become detached from the gutter (right rear corner of carport from the road) Effect: Failure to have the downspout properly attached can result in the erosion where the concrete pad and soil meet below at the corner of the carport. The misdirected flow of water run-off can wash away the soil under the pad creating a hole and damage to the concrete pad below both of which can result in trip hazards. Directive: Consult with a qualified technician to re-attach the downspout to the gutter and eliminate the potential risk of erosion and damage to the concrete surface below, once completed provide photos of the completed work for our records.	C 174	Corrected Completed 10/19/17 Gutter re attached	

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C 174	Continued From page 3 4.) The rule requires "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". Findings: At the time of survey it was observed that the fan motor for the exhaust fan in the bathroom located across the hall from the staff quarters or bedroom #2 (per evacuation plan) is binding. Contact a qualified technician to replace the defective fan assembly with a new exhaust fan. When completed provide our offices with invoices and /or work orders of the completed work. Effect: Binding motors may result in a fire if left unchecked the threat is from both the heat from the motor and the potential of an electrical short or spark which can ignite combustibles which can result in a fire and cause injury or even death to both residents, staff or visitors. Directive: Consult with a qualified technician to replace the defective fan unit, it is also suggested that you or your agent consult with the local Building Official, since the code has made several changes in regards to exhaust fans and duct discharge installations since you were first licensed, once completed provide copies of receipts/invoices of any work needed to perform the required repairs. 5.) The rule requires "The building and all fire safety, electrical, mechanical, and plumbing	C 174	~~Corrected~~ Exhaust fan need Extension Will be repaired by -	10/14/17 11/1/2017

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C 174	Continued From page 4 equipment in a family care home shall be maintained in a safe and operating condition". Findings: It was observed at the time of survey that the guard or grill cover for the recessed wall mounted heater in the bathroom (hall bath) was damaged resulting in an opening exposing the units coils or heat source. Effect: The opening in the grill cover as noted above exposes the units coils, this can result as a potential burn or shock hazard if residents come into contact with the units heating element also the damaged cover has sharp edges which can cut or tear anyone's skin which may result in infection. Directive: Consult with a qualified technician to repair/replace the defective grill cover and eliminate the potential risk of injury to those it can effect, once completed provide copies of receipts/invoices of any work needed to correct the deficiency. 6.) The rule requires "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". Findings: It was observed at the time of survey that there is a hole/gap in the sheetrock (roughly 2 inches by a 1/2 inch) in the corner of the shower to the left of	C 174	Corrected 10/19/2017 → grill covered Mold Extension will be completed by 11/1/2017	

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C 174	Continued From page 5 the shower head where the ceramic tile and sheetrock meet in the shower stall. Effect: The hole or gap can allow water into the opening which can cause rot to wood members in the wall cavity and the moisture can contribute to the growth of mold, this can have adverse effects on both residents and staffs respiratory systems. Directive: Consult with a qualified technician to seal/patch the area in question and eliminate the potential risk of structural damage or mold growth, once completed provide copies of receipts/invoices of any work needed to perform repairs. 7.) The rule requires "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". Findings: It was observed at the time of survey that the basin sink in the hall bath located across the hall from bedroom #2 or Staff room/office was not draining water remained in the basin for an extended period of time. Effect: Blocked or clogged drains can usually can be the result of underlying structural problems to the drainage system, stagnant water can cause health concerns it can cause smells and potentially create health concerns to both	C 174	Corrected	9/21/17

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C 174	Continued From page 6 residents, staff or visitors. Directive: Consult with a qualified technician to investigate and discover the source of the clog, and take necessary measures to eliminate the deficiency, once completed provide copies of receipts/invoices of any work performed to perform the repairs.	C 174		
C 156	Fire Safety-Smoke, Heat Detectors T10: 42C .2213 FIRE SAFETY EQUIPMENT (b) The home must provide automatic, single station U.L. listed smoke (ionization) detectors in locations as determined by the Division of Health Service Regulation and U.L. listed heat detectors in the attic and basement. These detectors must be directly wired to the house current. This Rule is not met as evidenced by: 1. The Rule requires that " The home must provide automatic, single station U.L. listed smoke (ionization) detectors in locations as determined by the Division of Health Service Regulation and U.L. listed heat detectors in the attic and basement. These detectors must be directly wired to the house current.. Findings: At the time of survey it was observed that the home has two separate smoke detection systems, there is one system that is monitored	C 156	Requesting Extension to be completed by 11/1/2017	

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C 156	Continued From page 7 and when in alarm it notify's Security Central to notify the local Fire Department for emergency response. The home is also equipped with a residential system which consists of a smoke detector in the bedroom and immediately outside the bedrooms however there is not a smoke detector located in the front foyer (outside bedroom #4) meeting the requirements of R317 of the 2002 North Carolina State Residential Code the code in effect at the time of original Licensing. Effect: Failure to have a device in place that meets the requirement of the rule or code can place an endangerment to the safety and well-being of both residents and staff (prompt notification in the event of a fire in the front foyer). Directive: Consult with a qualified technician and place a NEW smoke detector in the front entry foyer of the home as required by code and rule; this work will require obtaining a Permit from your local City Building Official. The new detector will have to be wired to the house current; interconnected with the other residential devices and battery back-up, Once complete provide copies of permits and approvals from the local Building Official, being a life safety component we are required to conduct a follow-up site visit for verification.	C 156		