

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL058001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 11/15/2017
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NAME OF PROVIDER OR SUPPLIER PRICE FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1385 BROWN ROAD JAMESVILLE, NC 27846
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(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 Greg Williams DHSR Construction Section conducted a Biennial Survey on November 15, 2017 from 9:00 AM to 10:30 AM at the above referenced facility. DHSR records indicate the home was first licensed on December 28, 1967 as a Family Care Home for five Residents; Licensure rules at this time only allowed for a maximum capacity of five Residents. Effective on February 1, 1983 the building code was amended to allow for a maximum of six Residents, and effective on April 1, 1984 Licensure Rules were revised to allow for a maximum capacity of six residents as well. Your home is currently licensed with a capacity of Six (6) all-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", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, and the 1978 (Revision 5) 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 137	Bathroom-Mechanical Ventilation SECTION .0300 - THE BUILDING 10A NCAC 13G .0300 BATHROOM (g) The bathrooms shall be lighted to provide 30 foot candles of light at floor level and have mechanical ventilation at the rate of two cubic	C 137	In order to correct deficiency ID # C137 BATHROOM-MECHANICAL VENTILATION	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Kathleen A. Perry</i> (formally Hollis)	TITLE <i>Asst/Co Admin</i>	(X6) DATE <i>1-4-18</i>
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STATE FORM 0099 ZUG321 If continuation sheet 1 of 2

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

FCL058001

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: 01

B. WING: _____

(X3) DATE SURVEY
COMPLETED

11/15/2017

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

PRICE FAMILY CARE HOME

1385 BROWN ROAD

JAMESVILLE, NC 27846

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C 137

Continued From page 1

feet per minute for each square foot of floor area. These vents shall be vented directly to the outdoors.

This Rule is not met as evidenced by:

1.) The rule requires bathroom mechanical ventilation to be vented directly to the outdoors.

Findings Include:

At the time of the survey it was noted that a new mechanical Exhaust Fan had been installed in the Residents Bathroom (back) but not vented to the outdoors.

Effect:

Failure to vent the mechanical exhaust fan to the outdoors creates a fire hazard to the attic space.

Directive:

Have the mechanical exhaust fan vented directly to the outdoors and provide documentation to our office when completed.

C 137

Administrator will has has the mechanical exhaust fan vented directly to the outdoors. This is to be in compliance with the Rule Section.0300 - The Building 10A NCAC 13G .0309 Bathroom 1.) ; and to avoid fire hazard to the attic space.

DATE COMPLETED
Please See Picture
Provide with Plan

12-16-17

Administrator will make sure that future equipment changes or upgraded to facility, will be monitored more closely and completed before installer leaves job site.

Kathleen A. Perry

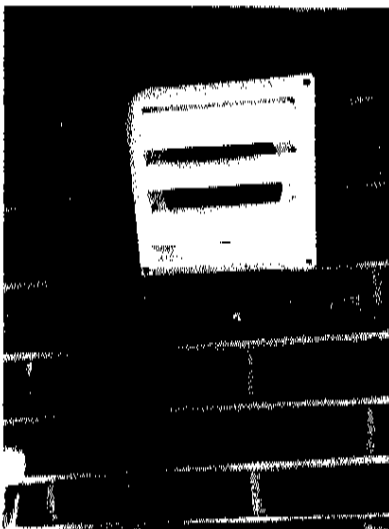
12/16/17



Vent Pipe hooked to the vent in the bathroom.



vent pipe going to the side of house.



Vent on the outside of the house.