STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY FAMILY CARE HOME #2	**912 BUCKHORN ROAD HARRELLS, NC 28444**

(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 Gabriel Villacres DHSR Construction Section conducted a Biennial Survey on January 10, 2018 from 2:00 PM to 3:18 PM at the above referenced facility. DHSR records indicate the home was first licensed on October 01, 2013 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 2005 Rules 10A NCAC 13G for Family Care Homes and the 2012 North Carolina Building Code - Building Code- Section 425.2 - 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 105	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North	C 105		

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C 105	Continued From page 1 Carolina 27603 at a cost of three hundred eighty dollars ($380.00). (b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home. This Rule is not met as evidenced by: (1) This rule requires that "Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. Findings: At the time of the survey, it was observed that there were non-GFCI outlets around the exterior of the home. Effect: If the outlet were to get wet, it could short the electrical panel in the home or electrocute someone if they are the cause of the short. Directive: Have a qualified technician replace the outlets with GFCI grade outlets. Once the correction has been completed, forward an invoice from the technician and photos to DHSR as validation of compliance. (2) The rule requires that "Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code." Findings:	C 105		

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C 105	Continued From page 2 At the time of the survey, it was observed that the railing for the front entrance ramp is 24 inches on the left and 25 inches on the right side. The required height for rails should be between 30-38 inches. Effect: Anything smaller than the required height runs the risk of staff or a resident falling over the railings. Directive: Have a qualified technician remove and replace the rails with ones that meet the required height. Once the correction has been completed, forward the invoice from the technician and photos to DHSR as validation of compliance. (3) The rule requires that "Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code." Findings: At the time of the survey, it was observed that a copper pipe was leaving the water heater as a relief valve, but it could not be seen were the exhaust went. Attempts were made to locate the end under the crawlspace but access into the crawl space could not be made. Effect: If the water heater is exhausting the hot water into the crawlspace, the excess moisture could cause the floor joist to grow mildew, mold, and rot. This would cause the floor to become soft.	C 105		

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C 105	Continued From page 3 Directive: Have a qualified technician validated that the relief valve from the water heater is discharging safely outside of the home.	C 105		
C 132	Bathroom-For Each 5 or Fewer SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (a) Adult care homes licensed on or after April 1, 1984, shall have one full bathroom for each five or fewer persons including live-in staff and family. This Rule is not met as evidenced by: This rule requires that "adult care homes licensed on or after April 1, 1984, shall have one full bathroom for each five or fewer persons including live-in staff and family." Findings: At the time the survey was conducted it was observed that the home had 6 residents and 2 bathrooms. Bathroom #2 is allocated for staff use only. Effect: One bathroom is not enough to support the needs of 6 residents living in the home. Directive: Ensure that both bathrooms in the home are designated for both residents and staff. Provide written comfirmation to this fact to the DHSR Construction Section.	C 132		

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C 147	Continued From page 4	C 147		
C 147	Outside Entrances/Exits-Single Hand Motion SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled. This Rule is not met as evidenced by: This rule requires that "all exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled." Findings: At the time of the survey, it was observed that the door in bedroom #4 utilized a thumb latch for egress. It was noted that the door woould not fully close and latch without the thumb latch. Effect: In the case of an emergency, the thumb latch could be difficult to open for someone with certain disabilities. If the door could not be opened in time, serious risk of injury or death could occur Directive: Have a qualified technician make the needed repairs to allow the door to close and latch without the thumb latch. Then remove the thumb latch or effectively deactivate it by removing the deadbolt pin from its housing. Once the	C 147		

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C 147	Continued From page 5 corrections has been completed, forward photos to DHSR Construction Section for validation of compliance.	C 147		
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails. This Rule is not met as evidenced by: This rule requires that "all steps, porches, stoops and ramps shall be provided with handrails and guardrails." Findings: At the time of the survey, it was observed that the stairs to the rear entrance/exit was missing a second handrail. Effect: If a resident with difficulty walking or certain injuries were to fall towards the open side of the stairs, a fall from above grade could occur. This fall could result in a possible sprain, facture, or concussion. Directive: Have a qualified technician install a second handrail. Once the corrections have been completed, forward photos and invoice from technician to DHSR Construction Section for validation of compliance.	C 149		

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C 153	Continued From page 6	C 153		
C 153	Housekeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: (1) This rule requires that "each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair." Findings: At the time of the survey, it was observed that the paint in bathroom #2 was lifting near the base of the shower head. Effect: Moisture from the shower will cause mold mildew and rot to grow beneath the pain could cause structural damage to the wall behind. Directive: Remove and restore the paint on the affected wall. Then caulk the corners that meet the shower walls to prevent moisture from collecting. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (2) This rule requires that "each family care home	C 153		

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C 153	Continued From page 7 shall have walls, ceilings, and floors or floor coverings kept clean and in good repair." Findings: At the time of the survey, it was observed that there were stains from water damage on the ceiling of bathroom #2. Effect: Water damage stains on wall or ceilings could be from a damaged water line or a leak in the roof. If water damage is present on the ceiling, it stands as proof to possible damage to structural trusses in the roof. Directive: Have a qualified technician inspect the attic of the home to ensure that no damage has been inflicted onto the support truss in the roof. Once the corrections have been completed, forward invoice to DHSR Construction Section as validation of compliance. (3) This rule requires that "each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair." Findings: At the time of the survey, it was observed that the wall paneling in bedroom #4 has paint peeling off and the panels splintering of the left side wall exposing bare wood. Effect: If a fire were to occur near the damaged panel,	C 153		

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C 153	Continued From page 8 the fire retardant paint would not be capable of acting as a preventative. This paneling would then act as an accelerant and could lead to life threatening situations. Directive: Repair/replace the damaged panels. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (4) This rule requires that "each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair." Findings: At the time of the survey, it was observed that the paint on the ceiling of the kitchen was peeling off. Effect: Paint peeling of the ceiling could potentially fall into food being prepared, making it toxic to the residents and staff consuming said food. Directive: Remove the paint that is peeling off and repaint ceiling. Once corrections have been completed, forward photo to DHSR Construction Section as validation of compliance. (5) This rule requires that "each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair." Findings:	C 153		

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C 153	Continued From page 9 At the time of the survey, it was observed that there was a hole in the wall of the dining room. Effect: Failure to repair the wall con result in more damage and extensive repairs. Directive: Have a qualified technician repair hole in wall. Once the corrections have been completed, forward invoice and photos of repair to DHSR Construction Section as validation of compliance.	C 153		
C 155	Housekeeping-Free of Obstructions SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: (1) The rule requires that "each family care home shall be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; Findings: At the time of the survey, it was observed that there was broken glass found in bedroom #2 on the window sill and floor beneath it.	C 155		

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C 155	Continued From page 10 Effect: Broken glass present in the home is a hazard and can cause serious injury by accident. Directive: Remove all broken glass in bedroom #2 from the window sill and floor. Vacuum floor to ensure all small fragments have been removed. Once the correction has been completed, forward photos to DHSR Construction Section as validation of compliance. (2) The rule requires that "each family care home shall be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards Findings: At the time of the survey, it was observed that the door to bedroom #2 had screws that permeated through from one side of the door to the other, leaving exposed points of the screw. Effect: The exposed screw ends could cause cuts and scratches to residents and staff members alike. Directive: Remove screws from the door and seal the holes created. Once the corrections have been completed, forward photos to the DHSR Construction Section as validation of compliance.	C 155		
C 162	Bedroom Furnishings-Bed	C 162		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 162	Continued From page 11 SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (1) A bed equipped with box springs and mattress or solid link springs and no-sag innerspring or foam mattress. Hospital bed appropriately equipped shall be arranged for as needed. A water bed is allowed if requested by a resident and permitted by the home. Each bed is to have the following: (A) at least one pillow with clean pillow case; (B) clean top and bottom sheets on the bed, with bed changed as often as necessary but at least once a week; and (C) clean bedspread and other clean coverings as needed; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: The rule requires that "each bedroom shall have the following furnishings in good repair and clean for each resident: (1) A bed equipped with box springs and mattress or solid link springs and no-sag innerspring or foam mattress. Findings: At the time of the survey, it was observed that the bed frame in bedroom #4 was slanted and not steady. Effect: If a resident were to sleep in the bed they could be injured when the legs of the bed give away.	C 162		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 162	Continued From page 12 Directive: Repair the bedframe so that the legs stand perpendicular to the ground. If this is not possible, then replace the bed frame. Once the correction has been completed, forward photos to DHSR Construction Section as validation of compliance.	C 162		
C 168	Fire Extinguishers SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (a) Fire extinguishers shall be provided which meet these minimum requirements in a family care home: (1) one five pound or larger (net charge) "A-B-C" type centrally located; (2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and (3) any other location as determined by the code enforcement official. This Rule is not met as evidenced by: (1) The rule require that "fire extinguishers shall be provided which meet these minimum requirements in a family care home: (1) one five pound or larger (net charge) "A-B-C" type centrally located; (2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and (3) any other location as determined by the code enforcement official. Findings: At the time of the survey, it was observed that the fire extinguishers in the home had outdated tags.	C 168		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 168	Continued From page 13 Effect: Without brand new inspection tags, it not possible to confirm the fire extinguishers are functioning properly. Failure to have functioning fire extinguishers could lead to inability to stop a small fire from growing. Directive: Take the extinguishers to a qualified vendor and have them serviced and retagged. Once the correction is complete, forward an invoice and photo to DHSR Construction Section as validation of compliance. (2) The rule require that "fire extinguishers shall be provided which meet these minimum requirements in a family care home: (1) one five pound or larger (net charge) "A-B-C" type centrally located; (2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and (3) any other location as determined by the code enforcement official. Findings: At the time of the survey it was observed that the second fire extinguisher was located on the top shelf of Bathroom #2. This proved diffcult to access the extinguisher without the use of a step stool. Effect: In the case of an emergency, the fire extinguisher is not easily accessible.	C 168		

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C 168	Continued From page 14 Directive: Mount the second fire extinguisher on a centrally located wall of the home. Once the correction is complete, forward an invoice and photo to DHSR Construction Section as validation of compliance.	C 168		
C 169	Fire Safety-Smoke Detectors SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (b) The building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup. Note: Smoke detectors are required to be interconnected by this Rule. The application of the Rule permits the heat detectors to be interconnected with smoke detectors, but does not require it. This Rule is not met as evidenced by: The rule requires that "the building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup." Findings: At the time of the survey, it was observed that the	C 169		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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SERENITY FAMILY CARE HOME #2	**912 BUCKHORN ROAD HARRELLS, NC 28444**

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C 169	Continued From page 15 smoke detectors in bedroom #1 and #2 were not interconnected with the rest of the detectors. Effect: If a fire occurred at the other end of the home, the resident inside bedroom #1 and #2 would have a delayed awareness of the situation. This would delay their evacuation and could result in loss of life. Directive: Have a qualified technician interconnect the smoke detectors in bedroom #1 and #2. Once the corrections have been completed, forward an invoice from the technician to DHSR Construction Section as validation of compliance.	C 169		
C 171	Fire Safety- Evacuation Plan SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (d) A written fire evacuation plan (including a diagrammed drawing) which has the approval of the local code enforcement official shall be prepared in large print and posted in a central location on each floor. The plan shall be reviewed with each resident on admission and shall be a part of the orientation for all new staff. This Rule is not met as evidenced by: The rule requires that "a written fire evacuation plan (including a diagrammed drawing) which has the approval of the local code enforcement official shall be prepared in large print and posted in a central location on each floor. The plan shall be reviewed with each resident on admission and	C 171		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 171	Continued From page 16 shall be a part of the orientation for all new staff." Findings: At the time of the survey, it was observed that the evacuation plans in living room, kitchen and both bathrooms were orientated incorrectly. Effect: If someone is not familiar with the homes layout or disoriented they could be misled when reading the evacuation plan and led away from the emergency egress route. In an emergency situation this could lead to fatal injuries. Directive: Orient the evacuation plans so that up on the plan (diagram) is straight ahead in the home layout. Once corrections have been completed, forward photos to DHSR Construction Section as validation of compliance.	C 171		
C 172	Fire Safety-Four Rehearsals SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall 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:	C 172		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 172	Continued From page 17 The rule requires that "there shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved." Findings: At the time of the survey, it was observed that the fire drills were not being performed during the 3rd shift. Effect: If an emergency were to occur during the 3rd shift, it is uncertain how the residents and staff members would respond. Sometimes certain patient take medications that might affect them differently during the 3rd shift and this could inhibit them from evacuating in a timely manner. Directive: Begin performing fire evacuation drills during the 3rd shift. Forward records to DHSR Construction Section as validation of compliance.	C 172		
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.	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 18 (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: (1) The rule requires that "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 the survey, it was observed that the kitchen outlet had a multi outlet adapter. Effect: Multi-outlet adaptors can overload circuits and cause fires. Directive: Remove all multi-outlet adaptors from the home and replace with powers strips with surge protectors as needed. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (2) The rule requires that "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 the survey, it was observed that the range hood filter needed to be cleaned. Effect: Range hood filters cloogged with grease can	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 19 present fire hazards. Directive: Remove any build up from the range ventilation filter. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (3) The rule requires that "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 the survey, it was observed that the faceplate for an electrical outlet in the dining room was broken. Effect: Broken faceplates allow access to live circuits which can present potential shock hazards. Directive: Replace the broken outlet faceplate with a new one. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (4) The rule requires that "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 the survey, it was observed that	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 20 there was lint present in laundry room behind the dryer. Effect: With the heat being released from dryer, lint can act as a fire starter and accelerant. Lint is also an air pollutant and could irritate the lungs if inhaled. Directive: Clean up any lint behind and around the dryer unit. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (5) The rule requires that "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 the survey, it was observed that the smoke detectors in bedroom #1 and #3 were both beeping indicating the batteries had to be replaced. Effect: If the home were to lose power due to a fire, the smoke detectors in bedroom #1 and #3 would not work. This could be hazardous to the staff and its residents alike and could result in serious injury from the delayed response. Directive: Replace the batteries in the smoke detectors. Once the corrections have been completed,	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 21 forward photos to DHSR Construction Section as validation of compliance. (6) The rule requires that "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 the survey, it was observed that the door for bedroom #2 would not latch closed. When asked, the staff member mentioned a resident had kicked the door open. The door around the knob and latch was splintered. Effect: In the case of a fire emergency, the door would fail to close properly to prevent smoke from spreading into the room. The resident of the room would also not be receiving the privacy needed. Directive: Replace broken latch with new latch and strike plate. If door is the issue, replace the door. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (7) The rule requires that "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 the survey, it was observed that the smoke detector in bedroom #3 was hanging by its	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 22 cables. Effect: Hanging from its wires may weaken the electrical connection which may result in the smoke detector not operating when tested. In an emergency situation any delayed awareness of a threat could be life threating. Directive: Place smoke detector back within the housing. Once the correction is completed, forward photos to DHSR Construction Section as validation of compliance. (8) The rule requires that "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 the survey, it was observed that the through bolts holding the door knob ends together was falling out on the door for bedroom #2. Effect: Having a through bolt fall out would disconnect both door knobs and render it dysfunctional and will not allow the door to close properly. Directive: Thread the through bolt to connect both door knobs. If the bolt is stripped then replace with a new bolt. Once the correction has been completed, forward photos to DHSR Construction	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 23 Section as validation of compliance. (9) The rule requires that "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 the survey, it was observed that the bolts holding the vanity fixture of bathroom #1 was falling out. Effect: If the bolts holding the lighting up were to release, it could inflict harm on a staff member or resident if they were using the sink. Directive: Thread the bolts back through the lighting unit and wall. Once the corrections have been completed, forward photos to DHSR Construction Section as validation of compliance. (10) The rule requires that "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 the survey, it was observed that the flexible hose from the dryer unit to the wall discharge has become disconnected. Effect: When the dryer is not connected, it will release	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 24 lint and excess heat and humidity into its surrounding areas. The lint is combustible; creating a fire hazard. The excess heat and humidity can cause mold and mildew to grow in the surrounding area. Directive: Connect the dryer to a non-combustible flex duct that output to an outdoor vent. Once the correction is completed, forward photos to the DHSR Construction Section as validation of compliance. (11) The rule requires that "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 the survey, it was observed that the dryer exhaust vent was was disconnected in the crawl space. Effect: With exhaust from the dryer discharging into the crawlspace instead of the outdoors, heat, lint, and humidity can build up creating mold, mildew, and rot. The heat and lint exhausted could also be a fire hazard. Directive: Have a qualified technician reconnect the non-combustible flex duct from the dryer to its exhaust vent and then permanently fix the exhaust vent into the outside wall of the home. Once the corrections have been completed,	C 174		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

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C 174	Continued From page 25 forward photos to DHSR Construction Section as validation of compliance. (12) The rule requires that "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 the survey we were unable to gain access to the attic to verify various systems, conditions, and equipment requirements due to various debris being stored in the area beneath the access door. Effect: Failure to ensure compliance of these systems and equipment may subject residents and staff to unknown hazards. Directive: Remove debris from below the attic entrance. Once all corrections have been completed, forward photos to DHSR construction section so a follow up visit can be scheduled to verfy compliance.	C 174		
C 175	Heating Sys.-No Unvented or Portable Elec. SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (b) There shall be a central heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. Built-in electric heaters, if used, shall be installed or	C 175		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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C 175	Continued From page 26 protected so as to avoid hazards to residents and room furnishings. Unvented fuel burning room heaters and portable electric heaters are prohibited. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: The rule requires that "Unvented fuel burning room heaters and portable electric heaters are prohibited." Findings: At the time of the survey, it was observed that there was a portable electric heater in bedroom #4. Effect: The electrical heater in the room violates both licensure rule and section 425.2.4 Directive: Remove the portable electric heater from the premise. Once the corrections have been completed, forward photos to DHRS Construction Section as validation of compliance.	C 175		
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 and safe condition. This Rule is not met as evidenced by:	C 183		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY FAMILY CARE HOME #2	**912 BUCKHORN ROAD HARRELLS, NC 28444**

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C 183	Continued From page 27 (1) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that there was a hole in the ground in the backyard infront of the crawl space entrance. Effect: If someone is unaware of the hole while traversing the backyard, they could step in it and harm themselves. Directive: Fill the hole with dirt to prevent anyone from injuring themselves. Once the correction has been completed, forward photos to DHSR as validation of compliance. (2) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that the door to the crawl space was rusted, warped, and unlocked. The door could also be pulled off its hinges. Effect: Vermin could inhabit the crawlspace. If they were to die, the corpse would emit an odor that would be unpleasant to the staff and residents alike.	C 183		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY FAMILY CARE HOME #2	**912 BUCKHORN ROAD HARRELLS, NC 28444**

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C 183	Continued From page 28 Directive: Replace the old door with a new one. Once the correction has been completed, forward photos to DHSR as validation of compliance. (3) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that the boards of the front entrance ramp are bowing and are soft. Effect: The warped boards present a tripping hazard to the staff and residents using the ramp. The soft board could be a sign of decay. Directive: Have a qualified technician replace the warped and soft board. Once the correction has been completed, forward an invoice from the technician and photos to DHSR as validation of compliance. (4) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that the exterior paint on the window frames were chipping off.	C 183		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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C 183	Continued From page 29 Effect: The paint chipping off the window frames looks unruly and could allow moisture to seep into the wooden frames of the window, allowing rot and mold to grow. Directive: Remove the paint that is chipping off and repaint with weather resistant paint. Once the correction has been completed, forward photos to DHSR as validation of compliance. (5) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that both the front and rear entrances had thresholds that were broken and had rot. Effect: Having rotten and broken thresholds pose as a trip hazard if it were to break off as a resident or staff member stepped on it. Directive: Remove and replace the thresholds on both entryways. Once the correction has been completed, forward photos to DHSR as validation of compliance. (6) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition."	C 183		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY FAMILY CARE HOME #2	**912 BUCKHORN ROAD HARRELLS, NC 28444**

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C 183	Continued From page 30 Findings: At the time of the survey, it was observed that there was a wasp nest in window of bedroom #2 and on the roof of the left side of the home. Effect: Stings from a wasp can induce allergic reactions from staff and residents alike. The allergies could also lead to lethal reactions. Directive: Have a qualified technician remove the wasp nest from both locations. Once the correction has been completed, forward photos to DHSR as validation of compliance. (7) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that there was trash/a plunger/broken furniture in the backyard. Effect: The clutter surrounding the area makes the home look unruly and unkempt. Directive: Remove the clutter in the backyard from the premise. Once the correction has been completed, forward photos to DHSR as validation	C 183		

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	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY FAMILY CARE HOME #2	**912 BUCKHORN ROAD HARRELLS, NC 28444**

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C 183	Continued From page 31 of compliance. (8) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that the light post in the front yard was knocked over and crushed. The light post still had a charge running through it as well. Effect: If not careful, staff or residents could be electrocuted. The fallen light post also acts as a trip hazard. Directive: Have a qualified technician disconnect the current running through the light post and then remove the debris. Replace with a new unit if desired. Once the correction has been completed, forward photos to DHSR as validation of compliance. (9) The rule requires that "the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition." Findings: At the time of the survey, it was observed that the flood light in the backyard had a missing bulb. Effect: The open socket presents the threat of surges due to foreign matter, rain, insects, debris, etc.	C 183		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL082025	A. BUILDING: **01** B. WING _____	**01/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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C 183	Continued From page 32 This surge could then short the electrical panel of the home or start a fire. Directive: Replace the empty socket with either a dead light bulb or a socket cover. Once the correction has been completed, forward photos to DHSR as validation of compliance.	C 183		