STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL096009	A. BUILDING: **01** B. WING _____	R **05/18/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANTHAM FAMILY CARE #II	**107 N GEORGIA AVENUE GOLDSBORO, NC 27530**

(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 Luis Padilla DHSR Construction Section conducted a Biennial Follow-up Survey on May 18, 2018 from 10:20 AM to 11:10 AM at the above referenced facility. Not all of the previously cited deficiencies were corrected. Therefore, further action is required. The remaining deficiencies 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: 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 the ceiling of the front porch in several areas is showing signs of rot and several members show signs of separating and in danger of falling. Effect: If not repaired/replaced the damaged members will continue to rot and require a more extensive	{C 174}		

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{C 174}	Continued From page 1 and costly repair. Continued decay can also result in safety hazards for both residents and staff as the members can fall and result in injury. Directive: Consult with a qualified technician and have the damaged rotten members removed and replaced with new, the new members must either be treated or painted to protect against the elements. Once completed provide photos of the work performed as well as receipts of the materials purchased for said repairs to our office as verification of compliance. 05/18/2018-LAP During our survey it was observed that the ceiling of the front porch had chipping paint. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work. 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: It was observed at the time of survey in several areas of the home but worse in the staff quarters that the interior trim work (windows and doors) had paint that is flaking, peeling, chipping and chalking. In the staff bedroom at the front window large flakes were observed in the window sill and this was aggravated more when I attempted to open the window and verify emergency egress.	{C 174}		

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{C 174}	Continued From page 2 Based on the age of the home (1960) per tax records there is a high probability that lead paint was used. Effect: Exposure to lead paint dust or chips can cause serious health problems for both children and adults, this can be done by touch - placing your hands or other lead-contaminated objects into your mouth, orally by eating paint chips or flaking lead-based paint, or inhaling lead contaminated dust are common causes of lead poisoning. Lead is a highly toxic metal and a very strong poison. Lead poisoning is a serious and sometimes fatal condition. It occurs when lead builds up in the body. Directive: First you need to determine if you do have lead based paint in your home, there are kits you can purchase at your local paint or hardware stores for self-testing or collecting samples and sending them to a laboratory for analysis. If you feel uncomfortable conducting or interpreting the result from a test kit, you can consult with your local building official as to what guidelines to follow both on how to determine if there is lead paint in the home and proper measures to follow for abatement. Once it is determined you can consult with a qualified technician and safely remove the old paint (following abatement procedures) and repaint the affected areas with an approved paint, once painting is completed provide to our office copies of invoices or receipts as well as photos of the completed work. 05/18/2018-LAP	{C 174}		

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{C 174}	Continued From page 3 During our visit it was observed that this deficiency has not been corrected. The interior trim work had paint that was flaking, chipping, and chalking. The provider was unable to identify if the paint was lead based. Make arrangements to have the deficiency corrected; provide documentation in the form of photos/invoices for all completed work.	{C 174}		
{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: 3.) The rule requires "The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition" Findings: It was observed at the time of survey that openings for the crawl space openings were either missing or not secure in their openings. Effect: Without the access door in place to deter it these openings allows both water and pest to enter freely into the area under the home. The moisture can contribute to mold and rot and pest can generate hazards to the occupants of the home (they can spread disease) as well as the potential of structural damage to wood and wires etc.	{C 183}		

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{C 183}	Continued From page 4 Directive: Consult with a qualified technician to re-affix or provide approved access doors for the crawl space openings. Once completed provide photos of the work performed as well as invoices detailing the actions taken, to remedy the condition. 05/18/2018-LAP During our visit it was observed that the crawl space doors were not properly secured. These doors would be held in place with bricks or not flush shut properly with a plywood board. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work. NEW DEFICIENCY 05/18/2018-LAP During our visit it was observed that on the left side of the home, a section of the bricks was broken off that allowed access to the crawl space. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	{C 183}		
{C 160}	Fire Safety-Smoke, Heat Detectors IV. The Building E. Fire Safety Requirements (10 NCAC 42C .2213) 3. The home must provide automatic, single station U.L. listed smoke (ionization) detectors in	{C 160}		

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{C 160}	Continued From page 5 locations as determined by the Division of Facility Services 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 Facility Services and U.L. listed heat detectors in the attic and basement. Findings: The home has a listed smoke detector in the hallway wired to the house current outside the resident bedrooms. No smoke detector was identified in the hallway outside the staff's quarters meeting the requirement of the rule or code in effect 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 on the lower level). Directive: Consult with a qualified technician and place a NEW smoke detector in the ceiling of the hallway immediately outside the staff's bedroom; this work will require obtaining a Permit from your local City Building Official. The pulling of this permit will also require the home to meet current code requirements as the device(s) will have to	{C 160}		

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{C 160}	Continued From page 6 be wired to the house current; interconnected with the other devices and battery back-up, based on this you will also need add devices in every sleeping room as required by code. Once complete provide copies of permits and approvals from the local Building Official, being a life safety component we are required our section to conduct a follow-up site visit for verification. LAP-05/18/2018 During our visit it was observed that staff had installed a smoke detector in the required area. However, this device was only battery powered and not tied to the house current. When activated, the newly installed smoke detector was not interconnected with the rest of the home. Make arrangements to have the deficiency corrected; provide documentation in the form of photos/invoices for all completed work.	{C 160}		