STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL059019	A. BUILDING: **01** B. WING _____	**05/10/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ROCKY PASS FAMILY CARE HOME	**5349 NC 226 SOUTH MARION, NC 28752**

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C 000	Initial Comments Report by Luis Padilla DHSR Construction Section conducted a Biennial Survey on May 10, 2018 from 9:55 AM to 11:40 AM at the above referenced facility. DHSR records indicate the home was first licensed on November 24, 1982; Licensure rules at this time only allowed for a maximum capacity of five (5) residents. Effective February 1, 1983 the building code was amended to allow for a maximum capacity of six (6) all ambulatory residents. Effective April 1, 1984 Licensure Rules were revised to allow a new capacity of six (6) ambulatory residents. The home is currently licensed for six (6) ambulatory residents (who are able to evacuate 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 Family Care Home Minimum Standards and Regulations, the applicable portions of the 2005 Rules (10A NCAC 13G) for family care homes, as well as the 1978 Edition (Revision 5) of 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; all deficiencies listed below were discussed with on-site staff during the exit interview. The listed deficiencies are as follows;	C 000		
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	C 132		

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C 132	Continued From page 1 or fewer persons including live-in staff and family. This Rule is not met as evidenced by: 1.) The rule requires 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: During our visit it was observed that there was only one bathroom available for the six (6) residents of the home. The second bathroom was only available to the staff member of the home. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation to reflect any changes made.	C 132		
C 135	Bathroom-Hand Grips SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (e) Hand grips shall be installed at all commodes, tubs and showers used by the residents. This Rule is not met as evidenced by: 1.) The rule requires hand grips shall be installed at all commodes, tubs and showers used by the residents: During our visit it was observed that there was a suction hand grip being used in the hallway bathroom of the home. This is not compliant with the rule. As a hand grip device, our office has determined that these type of devices present an increase potential or separating or detaching from the area	C 135		

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C 135	Continued From page 2 surface when in use. Provide a hand grip that is mechanically fastened or anchored to prevent potential hazards to residents while entering or exiting a tub or shower.	C 135		
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: 1.) The rule requires 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: During our visit it was observed that a thumb latch was being utilized for the back door. This is not compliant with the rule. Make arrangements to have the deficiency corrected. Ensure that all exit doors follow the single hand motion criteria as well. Provide documentation in the form of photos/invoices for all completed work.	C 147		
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS	C 149		

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C 149	Continued From page 3 (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails. This Rule is not met as evidenced by: 1.) The rule requires all steps, porches, stoops and ramps shall be provided with handrails and guardrails: During our visit it was observed that the back concrete walkway had a step down of 4 to 6 inches. This is not protected with either a ramp (1 to 12 slope) or handrails with guardrails to assist residents traversing the walk way. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work. 2.) The rule requires all steps, porches, stoops and ramps shall be provided with handrails and guardrails: During our visit it was observed that the front porch steps only had one handrail located along the house. A handrail with guardrail is required on both sides of the steps. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 149		
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	C 174		

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C 174	Continued From page 4 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 all electrical equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that a light fixture was missing its cover in Bedroom #1 and Bedroom #2. 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. 2.) The rule requires all electrical equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that in Bedroom #2 and both Bathrooms, various light fixtures had bulbs that were not functional. 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. 3.) The rule requires all electrical equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that the GFCI receptacle in the Hallway Bathroom would not reset once tested. This is not compliant with the rule. Make arrangements to have the deficiency	C 174		

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C 174	Continued From page 5 corrected; provide documentation in the form of photos for all completed work. 4.) The rule requires all electrical equipment in a family care home shall be maintained in a safe and operating condition: At the time of the survey it was discovered that an interior panel box had been converted into a junction box and the box cover was not secured. This is not compliant with the rule. Consult with local building official to verify current configuration is safe for residents and staff. Provide documentation from your local official verifying compliance. 5.) The rule requires all plumbing equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that the toilet in the staff bathroom was very loose from the floor. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form on photos/invoices for all completed work. 6.) The rule requires all fire safety equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that the fire extinguishers in the home were not undergoing a monthly inspection done by staff personnel. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of	C 174		

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C 174	Continued From page 6 photos for all completed work. 7.) The rule requires all mechanical equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that the dryer exhaust vent at the back of the home was full of lint. 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. 8.) The rule requires all building equipment in a family care home shall be maintained in a safe and operating condition: During our visit it was observed that the crawl space vents around the home were missing their screens. Code requires screens to prevent vermin entry. Make arrangements to have the deficiency corrected; provide documentation in the form of photos for all completed work.	C 174		
C 179	Building Service Equipment-Night Lights SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (e) All resident areas shall be well lighted for the safety and comfort of the residents. The minimum lighting required is: (3) 1 foot-candle power at the floor for corridors at night. (j) This Rule shall apply to new and existing family care homes.	C 179		

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C 179	Continued From page 7 This Rule is not met as evidenced by: 1.) The rule requires 1 foot-candle power at the floor for corridors at night: During our visit it was observed that staff was using a switched overhead light to act as a corridor night light. This is not compliant with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos/invoices for all completed work.	C 179		
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: 1.) The rule requires the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition: During our visit it was observed that the at the base of the Staff exterior door there were signs of rot along the jamb, threshold, and astragal. This is not compliant with the rule. Make arrangements to have the deficiency repaired; provide documentation in the form of photos for all completed work.	C 183		
C 131	Building Service Equipment-Call System IV. The Building	C 131		

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C 131	Continued From page 8 D. Building Service Equipment (10 NCAC 42C .2214) 5. Where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated sounding device must be provided connecting each resident bedroom to the live-in staff bedroom. The resident call switches, must be such that they can be activated with a single action and remain on until switched off by staff. The call switch must be within reach of the resident lying on his/her bed. This Rule is not met as evidenced by: 1.) The rule requires where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated sounding device must be provided connecting each resident bedroom to the live-in staff bedroom. The resident call switches, must be such that they can be activated with a single action and remain on until switched off by staff. The call switch must be within reach of the resident lying on his/her bed: During our visit it was observed that Bedroom #3 is remote from the staff bedroom which will require a call system for this room and staff quarters that complies with the rule. Make arrangements to have the deficiency corrected; provide documentation in the form of photos/invoices for all completed work.	C 131		
C 134	Fire Safety-Smoke. Heat Detectors IV. The Building E. Fire Safety Requirement (10 NCAC 42C .2213)	C 134		

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C 134	Continued From page 9 3. 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. These detectors must be directly wired to the house current. This Rule is not met as evidenced by: 1.) The rule requires U.S. listed heat detectors in the attic and basement: During our visit it was observed that the heat detector had dislodged itself from its frame. This is not compliant with the rule. Make arrangements have the heat detector re-attached and provide verification that the device is functional. 2.) The rule requires the home must provide automatic, single station U.S. listed smoke (ionization) detectors in locations as determined by the Division of Facility Services: During our visit it was observed that the smoke detector by the front door was giving off a very weak signal. This is not compliant with the rule. Replace the defective device with a new one to correct the deficiency. Provide documentation in the form of photos/invoices for all completed work. 3.) The rule requires the home must provide automatic, single station U.S. listed smoke (ionization) detectors in locations as determined by the Division of Facility Services:	C 134		

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C 134	Continued From page 10 During our visit it was observed that the smoke detector between Bedroom #2 and the Hallway Bathroom was not functional. This is not compliant with the rule. Replace the defective device with a new one to correct the deficiency; provide documentation in the form of photos/invoices for all completed work.	C 134		