

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL001150	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/19/2018
NAME OF PROVIDER OR SUPPLIER JUST LIKE HOME FAMILY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 617 DURHAM STREET BURLINGTON, NC 27217		
(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 Glenn Hoppin DHSR Construction Section conducted a Biennial Survey on December 19, 2019 from 9:00 AM to 11:00 AM at the above referenced facility. DHSR records indicate the home was first licensed on July 17, 2013 as a Family Care Home for five ambulatory Residents (able to respond and 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 2005 Rules 10A NCAC 13G for Family Care Homes and the 2012 North Carolina State Building Code - Section 425.2 - Residential Care Homes. NOTES: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with on-site staff during the exit interview. 2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed. The cited deficiencies are as follows:	C 000		
C 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for	C 117		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 117	Continued From page 1 review. This Rule is not met as evidenced by: At the time of the survey it was observed that the facility did not have a current approved sanitation report available for review. This is not compliant with the rule.	C 117		
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: 1. At the time of the survey it was observed that the fire escape for the second floor did not have handrails on the inside of the stairwell. This is not compliant with the rule. 2. At the time of the survey it was observed that the front rails did not have lower guard rails. This is not compliant with the rule. 3. At the time of the survey it was observed that the front rails were loose. This is not compliant with the rule.	C 149		
C 152	Floors 10A NCAC 13G .0314 FLOORS (a) All floors in a family care home shall be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs shall not be used. (c) All floors shall be kept in good repair.	C 152		

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C 152	Continued From page 2 This Rule is not met as evidenced by: At the time of the survey it was observed that the vinyl floor in the living room was not secured to the base molding and is curling up. This is not compliant with the rule.	C 152		
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: At the time of the survey the facility did not the fire drill log available for review. This is not compliant with the rule.	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. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that	C 174		

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C 174	Continued From page 3 the resident call system did not work. This is not compliant with the rule. 2. At the time of the survey it was observed that the fire alarm system was in a silenced alarm condition and the staff did not know how to reset the alarm. This is not compliant with the rule. 3. At the time of the survey it was observed that the fire extinguishers were not being checked by staff and the tags were not being dated and initialled on a monthly basis. This is not compliant with the rule. 4. At the time of the survey it was observed that the front left bedroom window is broken. This is not compliant with the rule.	C 174		