STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL017042	A. BUILDING: **01** B. WING _____	**02/07/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PARKER'S FAMILY CARE HOME	**10123 WADE DEAD ROAD CEDAR GROVE, NC 27231**

(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 February 07, 2019 from 8:30 AM to 10:30 AM at the above referenced facility. DHSR records indicate the home was first licensed on November 01, 1987 as a Family Care Home for six (6) ambulatory Residents (able to respond and evacuate without 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 1987 Minimum Standards and Regulations for Family Care Homes, the applicable portions of the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 1978 (Rev8) North Carolina State Building Code - Section 409.1g - 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 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	C 135		

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C 135	Continued From page 1 residents. This Rule is not met as evidenced by: At the time of the survey it was observed that the hall bath did not have handgrips on the toilet. This is not compliant with the rule.	C 135		
C 142	Corridor-Night Lights SECTION .0300 - THE BUILDING 10A NCAC 13G .0311 CORRIDOR (b) Corridors shall be lighted with night lights providing 1 foot-candle power at the floor. This Rule is not met as evidenced by: At the time of the survey it was observed that there are no night lights in the hallway. This is not compliant with the rule.	C 142		
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: At the time of the survey it was observed that the storm door on the front entrance of the facility was not single action. This is not compliant with the rule.	C 147		
C 153	Houskeeping And Furnishings-Clean, Repaired	C 153		

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C 153	Continued From page 2 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: At the time of the survey it was observed that the living room furniture was in a state of disrepair. This is not compliant with the rule.	C 153		
C 154	Housekeeping-Must Have Approved Sanitation SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (4) have a North Carolina Division of Environmental Health approved sanitation classification at all times; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: At the time of the survey it was observed that the facility did not have an approved fire and sanitation report available on-site for review. This is not compliant with the rule.	C 154		
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE	C 174		

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C 174	Continued From page 3 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 the electrical box that the living room smoke detector is mounted to is not secured in the ceiling. This is not compliant with the rule. 2. At the time of the survey it was observed that the GFCI receptacle to the left of the stove was loose. This is not compliant with the rule. 3. At the time of the survey it was observed that there were exposed electrical wires on the kitchen range hood. This is not compliant with the rule. 4. At the time of the survey it was observed that there was a build up of clothes and lint behind the dryer creating a fire hazard. This is not compliant with the rule. 5. At the time of the survey it was observed that the fire extinguishers in the kitchen and living room were not mounted to the wall. 6. At the time of the survey it was observed that the back flow damper for the dryer is damaged. This is not compliant with the rule. 7. At the time of the survey it was observed that the back porch has missing and broken pickets. This is not compliant with the rule.	C 174		

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C 174	Continued From page 4 8. At the time of the survey it was observed that the heat detector in the attic was wired into the electrical circuit for the smoke detectors. It is improperly wired and if it trips will create a short circuit on the smoke detectors. This is not compliant with the rule. 9. At the time of the survey it was observed that there is peeling paint on the soffit between roof lines. This is not compliant with the rule. 10. At the time of the survey it was observed that there is hanging insulation in the crawl space. This is not compliant with the rule. 11. At the time of the survey it was observed that there is an old riding mower, broken office chair and other discarded items in the back yard. This is not compliant with the rule.	C 174		
C 181	Fireplaces, Wood Stoves, Gas Logs SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (g) Fireplaces, fireplace inserts and wood stoves shall be designed or installed so as to avoid a burn hazard to residents. Fireplace inserts and wood stoves must be U.L. listed. (h) Gas logs may be installed if they are of the vented type, installed according to the manufacturers' installation instructions, approved through the local building department and protected by a guard or screen to prevent residents and furnishings from burns. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by:	C 181		

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C 181	Continued From page 5 At the time of the survey it was observed that the fireplace did not have any guards in place to prevent the residents from coming in contact with the wood stove. This is not compliant with the rule.	C 181		
C 125	Floors IV. The Building C. Physical Environment 10. Floors (10 NCAC 42C .2211) a. All floors must be of smooth, non-skid material and so constructed as to be easily cleanable. b. Scatter or throw rugs are not to be used. c. All floors must be kept in good repair. This Rule is not met as evidenced by: At the time of the survey it was observed that the living room floor is torn and warped and is in a state of disrepair. This is not compliant with the rule.	C 125		