PRINTED: 03/06/2019
FORM APPROVED

Division of Health Service Regulation

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | FCL092219 | A. BUILDING: 01<br>B. WING _____ | 02/26/2019 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| CARY FAMILY CARE | 545 FRONT RIDGE DRIVE<br>CARY, NC 27519 |

| (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<br><br>Report by Luis Padilla<br><br>DHSR Construction Section conducted a Biennial Survey on February 26, 2019 from 1:00 PM to 2:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on July 07, 2016 as a Family Care Home for three (3) non-ambulatory Residents (Unable 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 the applicable portions of the 2012 North Carolina Building Code - Residential - Section R103.<br><br>NOTES:<br><br>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.<br><br>2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.<br><br>The cited deficiencies are as follows: | C 000 | | |
| C 117 | Have Current San. And Fire Safety Approvals<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0302 DESIGN AND CONSTRUCTION<br>(n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. | C 117 | *See attached Form | 3/15/19 |

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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<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey it was observed that on site staff was unable to provide a current Fire and Sanitation Inspection Report. This is not compliant with the rule. | C 117 | | |
| C 149 | Outside Entrances/Exits-Handrails At Porches<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS<br>(f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey it was observed that there were not handrails installed for the two ramps of the home. This is not compliant with the rule. | C 149 | *Back Porch now elevated with subFlooring For Future Sunroom<br>*FRONT Ramp being Replaced with 6' Aluminum Ramp/Rails<br>*Added Rails + 3 Posts "L" SHAPE along Sidewalk | 3/15/19<br>4/1/19 |
| C 152 | Floors<br><br>10A NCAC 13G .0314 FLOORS<br>(a) All floors in a family care home shall be of smooth, non-skid material and so constructed as to be easily cleanable.<br>(b) Scatter or throw rugs shall not be used.<br>(c) All floors shall be kept in good repair.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey it was observed that scatter rugs were being utilized at the front entrance and garage door of the home. This is not compliant with the rule. | C 152 | *Removed Throw Rugs at both doors | 3/1/19 |
| C 169 | Fire Safety-Smoke Detectors<br><br>SECTION .0300 - THE BUILDING | C 169 | | |

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| C 169 | Continued From page 2<br>10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN<br>(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.<br>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.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey it was observed that the heat detector for the home was located at the bottom of the attic. This is not compliant with the rule. | C 169 | * Expected completion date of May 1st 2019 (Lack Funds) To Raise Heat detector in attic | 5/1/19 |
| C 174 | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT<br>(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.<br>(j) This Rule shall apply to new and existing family care homes.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey it was observed that the electrical panel was difficult to access due to the amount of storage in front of it. This is not compliant with the rule. | C 174 | * cleared stored items From Electrical Panel access | 3/1/19 |

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| C 177 | Building Service Equipment-Hot Water<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT<br>(d) The hot water tank shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C).<br>(j) This Rule shall apply to new and existing family care homes.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey it was observed that the water temperature in the Bathroom of Bedroom #3 reached temperatures of 122 degrees Fahrenheit. This is not compliant with the rule. | C 177 | X adjusted water heater temperature to below 116° F | 3/1/19 |



X Mark Truesdell Administrator

Date: 20 MARCH 2019

NC Department of Environmental and Natural Resources
Division of Environmental Health

# INSPECTION OF RESIDENTIAL CARE FACILITY

(For facilities, as defined, with not more than 12 residents)

**Demerit Score:** 4
**Date of Insp/Chg:** 02/20/2019
**Status Code:** A

**Health Department:** WAKE
**Current Facility ID:** 04092431156
**Old Facility ID:**

| | | | | |
|---|---|---|---|---|
| **Water Supply** | ☒ Community | ☐ Non-Transient Non-Community | **Water sample taken?** ☐ Yes ☒ No | |
| | ☐ Transient Non-Community | ☐ Non-Public Water Supply | ☒ Inspection | ☐ Name Change |
| | | | ☐ Visit | ☐ Status Change |
| **Wastewater** | ☒ Community | ☐ On-Site System | ☐ Re-Inspection | ☐ Verification of Closure |

**Name of Establishment:** CARY FAMILY CARE
**Location Address:** 545 FRONT RIDGE DR

**City:** CARY **State:** NC **Zip:** 27519

**Permittee:** MARK TRUESDELL
**Number of Residents:** 0
**Mailing Addr:** 545 FRONT RIDGE DR.

**City:** CARY **State:** NC **Zip:** 27519

☒ Approved (20 or less demerits, and no 6-point deductions)
☐ Provisional (More than 20, but 40 or less demerits, or a 6-point demerit)
☐ Family Foster Home (Only items 1 and 2 apply)
☐ Disapproved (More than 40 demerits or failure to improve provisional classification)

| | | Demerits | COMMENTS |
|---|---|---|---|
| 1 | **WATER SUPPLY: Public supply; private supply approved 6 ( )** | | |
| 2 | **LIQUID WASTES: Sewage and other liquid wastes disposed of by approved method 6 ( )** | | |
| 3 | **FOOD SUPPLIES AND PROTECTION: Supplies: All food clean, wholesome, no spoilage 6; Protection: Adequate during storage, preparation and serving, potentially hazardous food 45° F or below, or 140° F or above 5; all refrigerators with thermometers (2;) pork, ground beef products, poultry and stuffings, etc., thoroughly cooked; meat and poultry salad, potato salad, etc., handled as required, no re-serving of portions once served to an individual 4; food containers stored above floor and protected from contamination 2; pets and other animals not allowed where food is prepared or stored, nor in serving area (unless caged or otherwise restricted) 4 ( )** | 2 | 3. Thermometer in kitchen refrigerator not functioning properly. Thermometer was reading 77F while food temperature was reading at 34F. All refrigerators shall be provided with accurate thermometers. |
| 4 | **FOOD SERVICE UTENSILS AND EQUIPMENT: Food service utensils and equipment in good repair and kept clean 4; eating and drinking utensils clean to sight and touch, cleaned after each use; approved facilities 4; clean utensils properly stored 2; substances containing poisonous material not used for cleaning or polishing eating or cooking utensils 6; disposable items properly stored and handled, used only once 2 ( )** | | 9. Observed debris and dead insect underneath couch cushion in living room. All furniture shall be in good repair and clean. |
| 5 | FOOD SERVICE PERSONS: Clean clothes, hands, and work habits 4 ( ) | | **General Comments:** Inspection led by Jackson Hooton. -Found debris / soil buildup on shower floor in bathroom #1. Bathing facility fixtures shall be maintained in good repair and kept clean. -Minor scuffing/staining on wall in laundry room area. Walls and ceilings shall be kept clean. Person in charge cleaned wall during inspection. |
| 6 | DRINKING WATER FACILITIES: ICE HANDLING: Common drinking cups not used 4; ice, if provided, handled and dispensed in a sanitary manner 2 ( ) | | |
| 7 | HOT AND COLD WATER: Adequate hot and cold water piped to points of use 4 ( ) | | |
| 8 | TOILET: HANDWASHING: LAUNDRY AND BATHING FACILITIES: Toilet, lavatory and bathing facilities adequate 4; fixtures in good repair and kept clean 2; soap and towels provided 2 ( ) | | |
| 9 | BEDS: LINEN: FURNITURE: All furniture, mattresses, linen, drapes, blinds and similar items in good repair and clean 2; bed linen changed as required 2; clean and soiled linens properly stored and handled (2) ( ) | 2 | |
| 10 | STORAGE: MISCELLANEOUS: Rooms or areas provided for storage of clothes, personal effects, luggage, supplies and equipment kept clean 2; medications, cleaning supplies, pesticides and other hazardous products properly stored as required 4 ( ) | | |
| 11 | FLOORS: In good repair 1; kept clean 2 ( ) | | |
| 12 | WALLS AND CEILINGS: In good repair 1; kept clean 2 ( ) | | |
| 13 | LIGHTING AND VENTILATION: Windows and fixtures in good repair 1; kept clean 2 ( ) | | |
| 14 | VERMIN CONTROL: PREMISES: Outside openings effectively screened or otherwise protected against entrance of flying insects, and flying insects absent 4; effective control of rodents and other vermin 4; approved pesticides properly used 4; premises neat, clean, drained and free of litter and vermin harborages and breeding areas 2 ( ) | | |
| 15 | SOLID WASTES: Garbage in standard containers, properly covered and stored, approved disposal 4; containers, storage area kept clean 2; dry rubbish in suitable receptacles, approved storage and disposal 2 ( ) | | |
| | **TOTAL DEMERIT SCORE** | 4 | |

**Inspection By:** Loc Nguyen

**EHS ID#:** 2603