TO: Construction Division
From: Hattie Carrington Dunham
Changing Places 7CH

NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

February 27, 2019

Hatie Dunham (via e-mail only)
209 Ganyard Farmway
Durham, NC 27703

RE: FC Follow-Up Biennial Construction Survey
FID #960821 Fcl032146
Changing Places Family Care Home Of Durham
725 Hanson Road
Durham Durham County

Dear Ms. Dunham:

On **February 22, 2019**, a Biennial Follow-Up Construction Survey was conducted at your facility by the Construction Section of the Division of Health Service Regulation to determine if your facility was in compliance. As a result of this survey, your facility is not in substantial compliance due to uncorrected deficiencies. Failure to correct the outstanding deficiencies may jeopardize the status of your license. Corrections are required and a **Signed Plan of Correction** must be submitted.

Plan of Correction (PoC)

A PoC for the deficiencies must be submitted March 14, 2019

Your PoC for the deficiencies must contain the following:

- What corrective action(s) will be accomplished by the facility to correct the deficient practice;
- How you will identify other life safety issues having the potential to affect residents by the same deficient practice and what corrective action will be taken;
- What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and,

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
	FCL032146	A. BUILDING: 01 B. WING _____	R 02/22/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CHANGING PLACES FAMILY CARE HOME OF I	725 HANSON ROAD DURHAM, NC 27713

(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 February 22, 2019 from 11:30 AM to 12:15 PM 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 153}	Houskeeping And Furnishings-Clean, Repaired 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: 4. During our visit it was observed that in the Staff Bathroom the window frame in the shower showed signs of rot. LAP-02/25/2019 At the time of the survey it was observed that this deficiency had remained outstanding. This is not compliant with the rule.	{C 153}	The window frame in the shower will be repaired and finished by March 29th 2019 the administor will perform monthly check for repairs to prevent this from occurring.	
{C 174}	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE	{C 174}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
[signature]	Administrator	3-14-19

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{C 174}	Continued From page 1 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: NEW DEFICIENCIES-02/22/2019 1. At the time of the survey it was observed that the oven storage pan was exposed. This is not compliant with the rule.	{C 174}	The oven pan (storage) will be repaired by march 29th 2019	
	2. At the time of the survey it was observed that the dryer exhaust at the rear of the home had a build up of lint around it. This is not compliant with the rule.		The Dryer exhaust is the rear of the house repaired.	3-12-19
{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. During our visit it was observed that both the soffit and gutters around the rear of the home was damaged. LAP-02/25/2019 At the time of the survey it was observed that this deficiency had remained outstanding. This is not compliant with the rule.	{C 183}	This soffit + gutters around the rear of the home will be finished by 3-29-19	
	2. During our visit it was observed that the			

Division of Health Service Regulation

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{C 183}	Continued From page 2 window frames at the rear of the home had chipped paint and possible rot damage. LAP-02/25/2019 At the time of the survey it was observed that this deficiency had remained outstanding. This is not compliant with the rule.	{C 183}	The window frame at the rear of the home and the paint will be finished by 3-29-19 The administrator will be responsible for monthly check to ensure that all repairs are complete.	