

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL008042	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/02/2019
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

MOORE'S FAMILY CARE II

**158 HWY NC 42
POWELLSVILLE, NC 27967**

(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 Survey on May 2, 2019 from 1:10 PM to 2:05 PM at the above referenced facility. DHSR records indicate the home was first licensed on February 15, 2017 as a Family Care Home for six (6) ambulatory Residents (able 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 - 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 105	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building	C 105	C 105 (1) The discharged from the hot water tank will not discharge into the crawl space. A licensed plumber will make the correction so that the hose to the tank will expel through the foundation (brick underpinning so that any water will be released in the yard/drainage. A monitoring tool will be created and implemented in the QA Improvement Plan and the Admin/SIC will monitor on a quarterly basis to make sure that the facility is in compliance with the rules and regulations of the NC State Building Code and to ensure this deficient practice will not happen again. Completion date by May 30, 2019 <i>Completed 5/15/19</i>	

Division of Health Service Regulation

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

Cara Donut

TITLE

Admin

(X5) DATE

5/15/19

Division of Health Service Regulation

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C 105	Continued From page 1 Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars (\$380.00). (b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the Hot Water Tank for the home discharges into the crawl space. This is not compliant with the rule.	C 105		
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. At the time of the survey it was observed that the screen door for the rear exit is not single hand	C 147	C 147 (1) The lock component on the screen door of the rear exit will be removed, so that the door will no longer lock to become a single hand motion for exiting. A monitoring tool will be created and will be implemented in the QA Improvement Plan. The Admin/SIC will monitor on a quarterly basis to ensure that the facility will stay in compliant with the rules and regulations of NC State Building Code and to make sure that this deficient practice will not happen again. Completed May 12, 2019 <i>Completed 5/12/19</i>	

Cwa Korman

Admin

5/15/19

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C 147	Continued From page 2 motion. This is not compliant with the rule.	C 147	
C 169	Fire Safety-Smoke Detectors SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (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. 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. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the heat detector for the home was a 135 degree Fahrenheit rated device and was not on a dedicated sounding device. This is not compliant with the rule.	C 169	C 169 (1) The heat detector will be installed properly to be in compliant the rule and regulations. The heat detector will be interconnected with a dedicated sounding device (smoke detectors or pull station sounding device). A monitoring tool will be created for QA Improvement Plan to monitor and inspect quarterly. The Admin/Maintenance Person will ensure that this inspection is done and recorded to make that this deficient practice will not happen again and to be in compliant with the NC State Building Code. Completion date By May 30, 2019 <i>Completed 5/15/19</i> C 174 (1) The slight leak under the sink will be repaired so that there is no leak or water expelled in the cabinet. This will be implemented in the QA Improvement Plan, to be, in compliance, with the rules and regulation. The Admin/SIC will create a tool used to monitor every 30 days, to make sure that this deficient practice will not happen again Completion date By May 30, 2019 <i>Completed 5/15/19</i> C 174 (2) A filter has been installed for the return register located in the laundry room closet. A tool has been created for monitoring every 30 days for changing or cleaning. The Admin/SIC will monitor to ensure that the facility will stay in compliant with this rule and regulation and to ensure this deficient practice will not happen again. Completed May 12, 2019 <i>Completed 5/12/19</i> C 174 (3) The build up of lint behind the dryer has been removed. A tool has been created to monitor every 30 days to ensure that the facility will stay in compliance with the rules and regulations. The Admin/SIC will monitor the cleaning sheet through inspection every 30 days to ensure that this deficient practice will not happen again. Completed May 12, 2019 <i>Completed 5/12/19</i>
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.	C 174	

Division of Health Service Regulation
STATE FORM

8909

2K9G21

If continuation sheet 3 of 5

Ava Dornif Admin
5/15/19

If continuation sheet 4 of 5

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C 183	Continued From page 4 This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the paint on the back door was peeling off. This is not compliant with the rule. 2. At the time of the survey it was observed that the concrete end of the ramp was not level with the ground, presenting a trip hazard. This is not compliant with the rule.	C 183		

Division of Health Service Regulation
STATE FORM

2K9G21

If continuation sheet 5 of 5

Ava Darnell Adams 5/15/19

WHITE & WOODLEY MECHANICAL CONTRACTORS, INC.

Plumbing, Heating, Electrical & Air Conditioning Supplies

Sales & Service

2107 U.S. 13 S. P.O. Box 127

AMOSKIE, NC 27910

(252) 332-4131

CUSTOMER'S ORDER NO.		PHONE		DATE 5-15-19	
NAME MOORES Family CARE					
ADDRESS 158 Hwy 42 Powellsville					
SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	PAID OUT
QTY.	DESCRIPTION			PRICE	AMOUNT
2	Plastic N/o Boxes			1.17	2.34
1	old work Plastic Box				2.59
3	Blank Plates			.73	2.19
6	Wrenches				1.50
20ft	1" pvc pipe			.89	17.80
2	1" pvc ell's			1.32	2.64
1	weather proof cover				13.79
1	Round plastic Box				4.86
	strappers				3.00
1	Faucet				48.79
1	Toilet Fill valve				14.81
2	Lavatory supplies			3.96	7.92
1	Toilet supply				2.74
3	per stops			8.62	25.86
3	per ferrels			TAX	.90
RECEIVED BY B.H.				TOTAL	

CONTINUED

C PRODUCT 610

All claims and returned goods must be accompanied by this bill.

1 of 2

Thank You

(252) 332-4131

All claims and returned goods must be accompanied by this bill.

Thank You