STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL051063	A. BUILDING: **01** B. WING _____	**04/24/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PANDORA FAMILY CARE HOME	**924 HOBBS STREET CLAYTON, NC 27520**

(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 Anthony Brinson DHSR Construction Section conducted a Biennial Survey on April 24, 2019 from 9:30 AM to 11:20 AM at the above referenced facility. DHSR records indicate the home was first licensed on April 03, 2017 as a Family Care Home for six (6) ambulatory residents who are (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 for Family Care Homes 10A NCAC 13G, and the applicable portions of 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 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	C 105		

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C 105	Continued From page 1 requirements of the North Carolina State Building 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 survey observations identified conditions as not being compliant with minimum building code requirements, this is not compliant with the rule: a) In the basement it was observed that the the relief valve for the hot water heater (located in the basement) was not piped this is not compliant with code requirements:; b) In the crawl space it was observed that the dryer vent discharge was a PVC pipe; this pipe discharged to the out of doors as required , but no backdraft damper was provided, the missing damper and the PVC pipe used are not compliant with code requirements: c) At the time of survey it was observed that there are several electrical conditions that are not compliant with code requirements two open	C 105		

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C 105	Continued From page 2 junction boxes located in the following locations (1) in the attic above the carport near the newly installed attic fan, (2) in the basement approximately four feet from the steps, towards the Hot Water Heater in addition electrical wiring was observed in the basement outside of an approved box (this was noted approximately two feet away from the open junction box); d) at the time of survey an unapproved multi-plug adapter was being utilized in the family room ,this is not allowed by code. e) at the time of survey it was verified that under the carport where the exterior door from the staff quarters swings out over the steps , no landing is provided , provide a landing that meets the code requirement and in addition provide handrails and guardrails at the landing and steps as required by licensure rule .0312 (f). f) at the time of survey it was identified that the bedroom designated as staff quarters was not provided with a smoke detector inside and immediately outside as required by code; provide a smoke detector that is wired to the house current interconnected with the homes other smoke detectors and battery backup as explained in Section R314 of the NCSBC - Residential Code Take action to correct the listed deficiency's, once completed, provide photo's and receipts of the completed work to the DHSR Construction Section as verification of compliance.	C 105		
C 110	Construction-Basement, Attic SECTION .0300 - THE BUILDING	C 110		

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C 110	Continued From page 3 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (g) The basement and the attic shall not to be used for storage or sleeping. This Rule is not met as evidenced by: 1.) At the time of survey it was observed that diapers; cardboard boxes and abandoned equipment etc. were being stored in the basement of the home, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 110		
C 113	Construction-Door Width SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (j) The door width shall be a minimum of two feet and six inches in the kitchen, dining room, living rooms, bedrooms and bathrooms. This Rule is not met as evidenced by: 1.) At the time of survey it was verified that the doors leading from Bedroom #2 and Bedroom #3 into the shared resident bathroom measure only 24 inches or 2 feet in width, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's and invoices/receipts indicating all work performed to the DHSR Construction Section as verification of compliance.	C 113		
C 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND	C 117		

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C 117	Continued From page 4 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 review. This Rule is not met as evidenced by: 1.) At the time of survey it was verified that copies of an approved fire and sanitation reports were not on site or not yet performed. Take action to correct the deficiency, once completed, provide copies of the approved inspection reports to the DHSR Construction Section as verification of compliance.	C 117		
C 146	Outside Entrances/Exits-Ramp(s) SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (c) At least one principal outside entrance/exit for the residents' use shall be at grade level or accessible by ramp with a one inch rise for each 12 inches of length of the ramp. For the purposes of this Rule, a principal outside entrance/exit is one that is most often used by residents for vehicular access. If the home has any resident that must have physical assistance with evacuation, the home shall have two outside entrances/exits at grade level or accessible by a ramp. This Rule is not met as evidenced by: 1.) At the time of survey it was observed that the homes ramp doesnt discharge at grade as required by the rule, the ramp ends abruptly approximately 2 inches above grade which creates a trip hazard, this is not compliant with	C 146		

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C 146	Continued From page 5 the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 146		
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 survey it was observed that multiple exit doors were not provided with single hand motion lockset's, in addition several storm doors had thumb latches and multiple interior doors had hook/clasp locks and on the exterior of the home, the door from bedroom #2 had a padlock clasp assembly, these conditions are not compliant with the rule. Take action to correct the deficiency's, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 147		
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:	C 149		

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C 149	Continued From page 6 1). At the time of survey, it was verified that at the exterior door leading from the staff quarters and the exit from the kitchen (both of which discharge under the carport) and the exit off of bedroom #1 (house side) are not provided with hand rails and guardrails, this is not compliant with the rule. Take action to correct the listed deficiency, once completed, provide photo's and invoices/receipts indicating all work performed to the DHSR Construction Section as verification of compliance.	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. This Rule is not met as evidenced by: 1.) At the time of survey it was observed that both scatter and throw rugs were identified in multiple locations, the living room, the kitchen, the front entry, the rear bathroom and the side exit etc., this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 152		
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	C 169		

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C 169	Continued From page 7 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 survey the following conditions were observed in the facility, that are not compliant with the rule; (a) The home has three attic compartments, #1 is accessed from the carport, #2 is accessed from the front hallway between the office and the dining room and #3 is in the back hallway between bedrooms #2 & #3 . only one compartment (#2) was provided with a heat detector which is a 135 degree device, but has no dedicated sounding device; (b) in the basement it was identified that no heat detector is provided ; Take action to correct the listed deficiency's, provide a heat detector in each attic compartment as well as the basement area these devices should have a temperature range between 150 to 194 degrees Fahrenheit, (as to prevent nuisance alarms) , in addition ensure that a dedicated sounding device which is audible throughout the home is provided for the listed heat detectors, once completed, provide photo's and invoices of the work performed to the DHSR Construction Section as verification of compliance.	C 169		

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C 174	Continued From page 8	C 174		
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 survey the following observations were found in the rear bathroom located between bedrooms #2 and #3; the face plate for the GFCI receptacle is loose in the wall and the toilet is loose at its base, this is not compliant with the rule. Take action to correct the listed deficiency's, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 2.) At the time of survey it was observed that the exterior of the home was in need of power-washing, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 3.) At the time of survey it was observed that the base of the front left porch column displayed signs of rot, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 174		

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C 174	Continued From page 9 4.) At the time of survey it was observed that no monthly monitoring has been performed on the homes fire extinguishers, this is not compliant with the rule, Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 5.) At the time of survey it was observed that the homes posted evacuation plan was not correctly orientated with the layout of the home as based on the plans current location, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 174		
C 175	Heating Sys.-No Unvented or Portable Elec. SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (b) There shall be a central heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. Built-in electric heaters, if used, shall be installed or protected so as to avoid hazards to residents and room furnishings. Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 survey it was observed that an electric space heater was being utilized in the staff quarters and a susposedly abandoned space heater was identified in the basement of the home; this is not compliant with the rule. Take	C 175		

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C 175	Continued From page 10 action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 175		
C 177	Building Service Equipment-Hot Water SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (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). (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 survey, it was observed that the water temperature in the resident bathrooms had a reading of 128 degrees Fahrenheit , this is not compliant with the rule. Make the adjustments as direct on site;once completed take readings of the water temperature for three consecutive days at three times a day on the Water Temperature Log that was left on site. Once completed provide the written log as well as invoices/receipts indicating all work performed to the DHSR Construction Section as verification of compliance.	C 177		
C 180	Building Service Equipment-Call System SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (f) Where the bedroom of the live-in staff is	C 180		

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C 180	Continued From page 11 located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that it can be activated with a single action and remain on until deactivated by staff. The call system activator shall be within reach of resident lying on his bed. (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 survey, it was verified that the room utilized as staff quarters is not in close proximity to the three resident use bedrooms, further observations indicated that none of the homes bedrooms were equpped with an electrically operated call system, this is not compliant with the rule. Take action to correct the listed deficiency, once completed, provide photo's and invoices/receipts indicating all work performed to the DHSR Construction Section as verification of compliance.	C 180		
C 184	Outside Premises-Fence SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (b) If the home has a fence around the premises, the fence shall not prevent residents from exiting or entering freely or be hazardous. This Rule is not met as evidenced by: 1). At the time of survey, it was verified that both of the exit gates for the chain link fence, located at the rear of the property were equipped with both a keyed padlock and a metal chain with a clasp, both of which may impede egress if	C 184		

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C 184	Continued From page 12 utilized, this is not compliant with the rule. Take action to correct the listed deficiency, once completed, provide photo's indicating all work performed to the DHSR Construction Section as verification of compliance.	C 184		