NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

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

May 13, 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 **May 9, 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 May 28, 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,
- How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place.

- o Include dates when corrective action will be completed. The corrective action dates must be acceptable to the State. Any completion date greater than **15** days from date of survey requires a written waiver from DHSR-Construction Section.

    - Corrective action must begin immediately

Your **Signed Plan of Correction** can be:

Mail to: DHSR Construction Section
2705 Mail Service Center
Raleigh NC 27699-2705

Fax to: (919)-733-6592

Email to: DHSR.Construction.Admin@dhhs.nc.gov

If you have any questions concerning the instructions contained in this letter, please contact me.

Sincerely,

David Hickman

David Hickman
Architectural/ Engineering Technician
DHSR - Construction Section

cc: Adult Care Licensure Section-with attachment
County Building Inspection Department - with attachment-(via e-mail only)
Durham County DSS - with attachment-(via e-mail only)

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 05/09/2019

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 David Hickman DHSR Construction Section conducted a second Biennial Follow-up Survey on May 8, 2019 from 1:25 PM to 1:45 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 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: NEW DEFICIENCIES-02/22/2019 1. 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. At the time of the survey it was observed that the dryer exhaust at the rear of the home still had a build up of lint. This is not compliant with the rule. Take the necessary steps to correct this deficiency	{C 174}	the adminstator will observe this monthly to ensure this does not reoccur. completed	5-13-19

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{C 183}	Continued From page 1	{C 183}		
{C 183}	Outside Premises-Clean, Safe	{C 183}		

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.

DEH-5/8/2019
At the time of the survey the soffit and gutters at the rear of the home still had not been repaired.

2. During our visit it was observed that the 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.

DEH-5/8/2019
At hte time of the survey the window frames at the rear of the home still had chipping paint and rot damage.

This repaired by June 30th 2019. The administrator will monitor the exterior of the house to maintain it to prevent this from reoccurring