STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL074041	A. BUILDING: **01** B. WING _____	**06/20/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLEMMIE'S FAMILY CARE HOME II	**110 PEARL DR** **GREENVILLE, NC 27834**

(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 June 20, 2019 from 11:15 AM to 12:00 PM at the above referenced facility. DHSR records indicate the home was first licensed on April 16, 2013 as a Family Care Home for three ambulatory Residents. The facility had an increase in capacity on May 6, 2014 to four ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency.) Based on this information we are requiring the home to maintain compliance with the following: the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 2012 North Carolina State Building Code - Section 421.2 - 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 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	C 147		

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C 147	Continued From page 1 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 both storm doors for the home are not single hand motion. This is not compliant with the rule. 2. At the time of the survey it was observed that a door was installed in the foyer of the home and it was not single hand motion. This is not compliant with the rule.	C 147		
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: 1. At the time of the survey it was observed that the bedroom windows were difficult to open due to the dry paint around it. This is not compliant with the rule.	C 153		
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT	C 174		

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C 174	Continued From page 2 (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 the survey it was observed that the hot water tank did not have a discharge valve that is less than 6 inches from the ground. This is not compliant with the rule. 2. At the time of the survey it was observed that the fire extinguishers for the home are not being inspected by staff on a monthly basis. This is not compliant with the rule. 3. At the time of the survey it was observed that the home did not have a properly installed dryer exhaust. This is not compliant with the rule. 4. At the time of the survey it was observed that the corridor bathroom for the home was under repair and not in use. This is not compliant with the rule. 5. At the time of the survey it was observed that the heat detector for the home was a 135 rated device. This needs to be a higher rated device, one between 192-212 degrees Fahrenheit.	C 174		
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.	C 183		

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C 183	Continued From page 3 This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the front ramp handrails did not extent to the full extent of the ramp, creating a trip hazard. This is not compliant with the rule. 2. At the time of the survey it was observed that the utility room for the home was filled with various objects and debris. This is not compliant with the rule.	C 183		