

Absolute Care Family Care Home

431 Junny Road,
Angier, NC 27501

919-673-2146 or 919-639-5500

Absolute Care Family Care Home

Construction Biennial Survey Plan of Correction

FID #960004 Fc1043034

C 169 Fire Safety-Smoke Detectors

10A NCAC 13G .0316 Fire Safety and Disaster Plan

To maintain compliance with the Rule/ Statue 10A NCAC 13G .0316 Fire Safety and Disaster Plan, the facility installed and connected the smoke detector in the Hallway and the Rear office with the other smoked detectors to communicate properly. Estimated completion August 1, 2019.

C 174 Building Equipment Maintained Safe, Operating

10A NCAC 13G .0317 Building Service Equipment

To maintain compliance with the Rule/ Statue 10A NCAC 13G .0317 Building Service Equipment, the facility repaired the lower portion of the handrail on the front ramp. Estimated completion August 1, 2019.

If you have any questions, I can be reached at 919-673-2146.

Thanks,

Carolyn Western, MSW, LCAS-A

Carolyn Western
August 1, 2019

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL043034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 07/03/2019
---	---	--	--

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

ABSOLUTE CARE FAMILY CARE HOME

**431 JUNNY ROAD
ANGIER, NC 27501**

(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 Biennial Follow-up Survey on July 3, 2019 from 1:10 PM to 1:50 pm at the above referenced facility. NOTES: 1.) At the time of our visit, there were deficiencies that had not been corrected. The uncorrected deficiencies are as follows:	{C 000}		
{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 there was no smoke detector in the hallway to the right of the home that was properly communicating with the other smoke detectors. This is not compliant with the rule. Take the necessary steps to install a smoke detector in this	{C 169}	<i>See Attached</i>	

Division of Health Service Regulation

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

TITLE

(X6) DATE

Carolyn Western
August 1, 2019

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL043034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 07/03/2019
---	---	---	--

NAME OF PROVIDER OR SUPPLIER ABSOLUTE CARE FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 431 JUNNY ROAD ANGIER, NC 27501
---	---

(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 169}	Continued From page 1 area that is interconnected with the other smoke detectors. *The new smoke detectors are still not communicating with all other smoke detectors.	{C 169}		
{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 the survey it was observed that the lower portion of the handrail on the front ramp was broken at the side next to the house. This is not compliant with the rule. Take the necessary steps to repair the broken rail. *The rail at the front ramp had not been repaired.	{C 174}	<i>See Attached</i>	

Carolyn Western
August 1, 2019



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

SECOND NOTICE

July 25, 2019
Carolyn Western (via e-mail only)
431 Junny Road
Angier, NC 27501

RE: Absolute Care Family Care Home - FC Biennial Construction Survey
431 Junny Road
Angier Harnett County
FID #960004 Fcl043034

Dear Ms. Western:

The Division of Health Service Regulation (DHSR) - Construction Section conducted a Biennial Survey of your facility on July 03, 2019. This survey was conducted by David Hickman. As a result of this survey, deficiencies were cited which required an acceptable Plan of Correction that was to be returned to our office by July 18, 2019.

As of the date of this letter, the Construction Section has not received your Plan of Correction. Enclosed is a copy of the letter and Statement of Deficiencies that was mailed or emailed to you.

You will need to type or print clearly your correction action and then **SIGN, DATE AND RETURN** the Plan of Correction to DHSR-Construction by August 9, 2019. Failure to return the signed Plan of Correction within this time period could potentially cause a suspension of admissions, provisional license or license revocation. The Provider may copy form(s) to be retained for your files.

Your 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

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
CONSTRUCTION SECTION

LOCATION: 1800 Umstead Drive, Williams Building, Raleigh, NC 27603
MAILING ADDRESS: 2705 Mail Service Center, Raleigh, NC 27699-2705
<https://info.ncdhhs.gov/dhsr/> • TEL: 919-855-3893 • FAX: 919-733-6592

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

Sincerely,

David Hickman

David Hickman

Architectural/ Engineering Technician

DHSR - Construction Section

cc: DHSR - Adult Care Licensure Section
County Building Inspection Department-(via e-mail only)
Harnett County DSS-(via e-mail only)