

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL092153	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 08/28/2019
NAME OF PROVIDER OR SUPPLIER THE MANOR AT EDGEWATER		STREET ADDRESS, CITY, STATE, ZIP CODE 1038 STORMY LANE RALEIGH, NC 27610		
(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 Survey on August 28, 2019 from 10:10 AM to 11:30 AM at the above referenced facility. DHSR records indicate the home was first licensed on August 14, 2009 as a Family Care Home for six 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 10A NCAC 13G for Family Care Homes and the 2006 North Carolina State Building Code - Section 421.2 - Residential Care Homes. 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 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:	C 174		

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

TITLE

(X6) DATE

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C 174	Continued From page 1 1. At the time of the survey it was observed that the evacuation plans were not oriented on the walls correctly. This is not compliant with the rule. Take the necessary steps to orient the plans correctly. 2. At the time of the survey it was observed that the fire extinguishers were not being checked on a monthly basis by the staff. This is not compliant with the rule. Take the necessary steps to have the staff check the extinguishers monthly and initial the tags. 3. At the time of the survey it was observed that the fire drill logs were not in order and were not up to date. This is not compliant with the rule. Take the necessary steps to keep the logs current. 4. At the time of the survey it was observed that the wall behind the refrigerator had a large hole in it. This is not compliant with the rule. Take the necessary steps to repair the wall. 5. At the time of the survey it was observed that the shoe molding in the hallway bathroom was loose at the tub and behind the toilet. This is not compliant with the rule. Take the necessary steps to repair or replace the molding. 6. At the time of the survey it was observed that the hot water temperature was in excess of 116 degrees. This is not compliant with the rule. Take the necessary steps to reduce the water temperature and complete the water temperature log accordingly. 7. At the time of the survey it was observed that the air return filter and cover were dirty. This is not compliant with the rule. Take the necessary	C 174		

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C 174	Continued From page 2 steps to replace the filter and clean the cover. 8. At the time of the survey it was observed that the toilet in the rear bathroom was loose at its base and there was a burned out bulb in the light fixture. This is not compliant with the rule. Take the necessary steps to secure the toilet and replace the bulb. 9. At the time of the survey it was observed that there was no smoke detector in the alcove/ laundry area outside of bedroom 5. This is not compliant with the rule. Take the necessary steps to add an interconnected smoke detector in this area. 10. At the time of the survey it was observed that the heat detector in the attic was loose and did not appear to be on a dedicated circuit or have a dedicated sounding device. This is not compliant with the rule. Take the necessary steps to correct this deficiency. 11. At the time of the survey it was observed that the handrail at the interior stairs was loose from the wall. This is not compliant with the rule. Take the necessary steps to secure the handrail. 12. At the time of the survey it was observed that the upstairs area was being used for storage and as a meeting area and did not have a second means of egress to the exterior. This is not compliant with the rule. Take the necessary steps to add a second means of egress. Make sure to obtain the necessary permits as applicable.	C 174		
C 180	Building Service Equipment-Call System SECTION .0300 - THE BUILDING	C 180		

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C 180	Continued From page 3 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (f) Where the bedroom of the live-in staff is 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 the survey it was observed that there was no call system available for the residents to alert the sleeping staff. This is not compliant with the rule. Take the necessary steps to install a call system to alert the staff.	C 180		
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. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the siding on the house was dirty and mildewed. This is not compliant with the rule. Take the necessary steps to powerwash the house.	C 183		