STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL054066	A. BUILDING: **01** B. WING _____	**09/26/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MILLER'S FAMILY CARE HOME	**306 E LENOIR STREET KINSTON, NC 28501**

(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 September 26, 2019 from 12:05 PM to 1:25 PM at the above referenced facility. DHSR records indicate the home was first licensed on December 2, 2004 as a Family Care Home for six (6) ambulatory Residents (able to respond and evacuate 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 1992 "Rules for Family Care Homes Minimum and Desired Standards and Regulations", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, the 2002 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 110	Construction-Basement, Attic SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (g) The basement and the attic shall not to be	C 110		

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C 110	Continued From page 1 used for storage or sleeping. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the attic area is being used as storage for various materials. This is not compliant with the rule.	C 110		
C 132	Bathroom-For Each 5 or Fewer SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (a) Adult care homes licensed on or after April 1, 1984, shall have one full bathroom for each five or fewer persons including live-in staff and family. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the home is licensed for six ambulatory residents. The second bathroom for the home is strictly for staff use, allowing only one bathroom for the six residents. This is not compliant with the rule.	C 132		
C 140	Storage Areas-Separate, Locked SECTION .0300 - THE BUILDING 10A NCAC 13G .0310 STORAGE AREAS (b) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be supervised while in use. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the cleaning supplies for the home are stored in the second bathroom of the home. This is not compliant with the rule.	C 140		

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C 142	Continued From page 2	C 142		
C 142	Corridor-Night Lights SECTION .0300 - THE BUILDING 10A NCAC 13G .0311 CORRIDOR (b) Corridors shall be lighted with night lights providing 1 foot-candle power at the floor. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that night lights were not being used in the corridors of the home. This is not compliant with the rule.	C 142		
C 144	Outside Entrances/Exits-Two Remote Exits SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (a) In family care homes, all floor levels shall have at least two exits. If there are only two, the exit or exit access doors shall be so located and constructed to minimize the possibility that both may be blocked by any one fire or other emergency condition. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the second means of egress, according to the floor plan, is listed thru the kitchen. The kitchen is closed off at night, blocking this emergency exit for the residents. This is not compliant with the rule.	C 144		
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	C 146		

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C 146	Continued From page 3 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 the survey it was observed that the two ramps for the home do not meet the 1:12 required ratio. The ramp on the right side of the home is 36 inches height and only 22.5 feet out. The ramp on the left side of the home is 32 inches high and only 16 feet out. This is not compliant with the rule.	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 the survey it was observed that the exit door in the Staff Bedroom and the storm door at the front are not single hand motion. This is not compliant with the rule.	C 147		

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C 152	Continued From page 4	C 152		
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 the survey it was observed that floor rugs were being used in Bedroom #1 of the home. This is not compliant with the rule. 2. At the time of the survey it was observed that the floor beside the shower of Bathroom #1 was soft. This is not compliant with the rule.	C 152		
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 Water Heater Tank for the home was inaccessible. Thus it was unable to be known if there is a pressure relief valve installed properly. Provide verification that a pressure relief valve is installed. 2. At the time of the survey it was observed that	C 174		

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C 174	Continued From page 5 there was a hanging smoke detector in Bedroom #4 of the home. This is not compliant with the rule. 3. At the time of the survey it was observed that on site staff would yell "FIRE, FIRE" to conduct fire drills within the home. This is not compliant with the rule.	C 174		
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 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 live in staff is located in a seperate are from resident bedrooms and no call system has been installed for the home. This is not compliant with the rule.	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	C 183		

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C 183	Continued From page 6 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 soffit on the right side of the home was damaged, exposing the home to moisture and pests. This is not compliant with the rule. 2. At the time of the survey it was observed that the right side ramp, there is a broken board towards the end of it. This is not compliant with the rule. 3. At the time of the survey it was observed that the dryer exhaust for the home had a build up of lint around it. This is not compliant with the rule. 4. At the time of the survey it was observed that there was an opening at the back of the home, exposing the crawl space. The door to the right of the opening is also damaged. This is not compliant with the rule. 5. At the time of the survey it was observed that the there was a build up of mildew around the home. This is not compliant with the rule.	C 183		