STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL008001	A. BUILDING: **01** B. WING _____	**09/24/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PATHWAYS II	**812 CHARLES TAYLOR ROAD** **AULANDER, NC 27805**

(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 Keith Blackwell DHSR Construction Section conducted a Biennial Survey on September 24, 2019 from 2:20 PM to 3:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on December 9, 1980. This facility is licensed for six (6) ambulatory residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency) which indicates that the bed count was increased to six sometime after April 1, 1984. Based on this information we are requiring the home to maintain compliance with the following: the 1984 "Family Care Homes Minimum Standards and Regulations," applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1978 (Revision 5) of the North Carolina State Building Code - Section 409.1 (g) - Residential Care Facilities. 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 dificiencies, 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	C 174		

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C 174	Continued From page 1 (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 kitchen exhaust fan is not working and the filter needs to be cleaned. This is not compliant with the rule. Take the necessary steps to repair or repalce the exhaust fan and clean or repalce the filter. 2.) At the time of the survey it was observed that the rear and side doors do not have a single hand motion door handle. This is not compliant with the rule. Take the necessary steps to repalce the door handle with a single hand motion handle. 3.) At the time of the survey it was observed that there are several deficiencies in the laundry room as follows: a.) there is not a GFCI receptacle b.) there is an exposed live electrical wire below the electrical panel c.) the water heater relief valve pipe is not secure d.) there is a blue and yellow utility cord being used as permenant wiring This is not compliant with the rule. Take the necessary steps to install a GFCI receptacle, properly terminate or remove the exposed electrical wire, secure the water heater relief valve piping, remove the utility cord and install the proper permenant wiring. 4.) At the time of the survey it was observed that there are several deficiencies in Bedroom #2 as follows:	C 174		

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C 174	Continued From page 2 a.) there is a wasp nest between the storm window and window b.) there are exposed live electrical wires at the baseboard heat register c.) chipping paint on the walls d.) door does not latch This is not compliant with the rule. Take the necessary steps to remove the wasp nest, install the proper cover over the wires on the baseboard heat register, remove the chipping paint and paint the walls, repair or replace the door handle so that it will latch. 5.) At the time of the survey it was observed that the window in Bedroom #7 will not stay open for emergency egress. This is not compliant with the rule. Take the necessary steps to repair or replace the window. 6.) At the time of the survey it was observed that the shoe moulding in the hallway was damaged and missing. This is not compliant with the rule. Take the necessary steps to repair the shoe moulding. 7.) At the time of the survey it was observed that in Bathroom #3 the receptacle will not trip. This is not compliant with the rule. Take the necessary steps to install a GFCI receptacle. 8.) At the time of the survey it was observed that in Bathroom #4 the wall at the shower needs to be repaired and needs caulking around the shower. This is not compliant with the rule. Take the necessary steps to repair the wall and caulk around the shower. 9.) At the time of the survey it was observed that in Bedroom #6 the window will not stay open for emergency egress. This is not compliant with the	C 174		

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C 174	Continued From page 3 rule. Take the necessary steps to repair or replace the window. 10.) At the time of the survey it was observed that there are several deficiencies in the staff bedroom as follows: a.) the door does not latch b.) the door has a slide bolt latch c.) the window has a broken pane d.) the smoke detector does not communicate with the rest of the alarms in the house e.) there is not a smoke detector located outside of the staff bedroom door This is not compliant with the rule. Take the necessary steps to repair or replace the door handle so that it will latch, remove the slide bolt latch, replace the broken window pane, repair or replace the smoke detector so that it will communicate with the rest of the alarms in the house, add a smoke detector outside of the bedroom door. 11.) At the time of the survey it was observed that the receptacle is loose in the living room area outside of the staff bedroom. This is not compliant with the rule. Take the necessary steps to repair or replace the receptacle. 12.) At the time of the survey it was observed that in the attic space accessible through bedroom #2 are the following deficiencies: a.) there is exposed electrical wires b.) the heat detector is hanging by its wires This is not compliant with the rule. Take the necessary steps to properly terminate the electrical wires and properly secure the heat detector to its base. 13.) At the time of the survey it was observed that in the attic space above the addition, accessible	C 174		

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C 174	Continued From page 4 through the staff bedroom, there is not a heat detector. This is not compliant with the rule. Take the necessary steps to properly install a heat detector. 14.) At the time of the survey it was observed that there is damaged flooring throughout the house. This is not compliant with the rule. Take the necessary steps to repair or replace the damaged flooring. 15.) At the time of the survey it was observed that there are not night lights in the house. This is not compliant with the rule. Take the necessary steps to install night lights in the hallways and rooms of the house. 16.) At the time of the survey it was observed that the front and rear storm doors will not shut and latch. This is not compliant with the rule. Take the necessary steps to repair or replace the storm doors.	C 174		