STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL051063	A. BUILDING: **01** B. WING _____	R **09/17/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PANDORA FAMILY CARE HOME	**924 HOBBS STREET CLAYTON, NC 27520**

(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 Anthony Brinson DHSR Construction Section conducted a Biennial Follow-up Survey on September 17, 2019 from 9:15 AM to 10:45 AM at the above referenced facility. Not all of the previously cited deficiencies were corrected therefor further action is required. The remaining deficiencies are as follows:	{C 000}		
{C 105}	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars ($380.00). (b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home. This Rule is not met as evidenced by: 1.) At the time of survey observations identified conditions as not being compliant with minimum	{C 105}		

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{C 105}	Continued From page 1 building code requirements, this is not compliant with the rule: a) In the basement it was observed that the the relief valve for the hot water heater (located in the basement) was not piped this is not compliant with code requirements:; 20190917-ARB - At the time of the follow-up survey it was observed that the the relief valve for the hot water heater (located in the basement) was piped with braided stainless steel flex pipe, this is not compliant with code requirements. provide an approved relief valve piping. b) In the crawl space it was observed that the dryer vent discharge was a PVC pipe; this pipe discharged to the out of doors as required , but no backdraft damper was provided, the missing damper and the PVC pipe used are not compliant with code requirements: 20190917-ARB - At the time of the follow-up survey it was observed that the dryer vent discharge is a PVC pipe; the PVC pipe used is not compliant with code requirements; verify with your local building official if he will accept this condition and provide verification to our office. e) at the time of survey it was verified that under the carport where the exterior door from the staff quarters swings out over the steps , no landing is provided , provide a landing that meets the code requirement and in addition provide handrails and guardrails at the landing and steps as required by licensure rule .0312 (f). 20190917-ARB - At the time of the follow-up survey it was observed that under the carport where the exterior door from the staff quarters	{C 105}		

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{C 105}	Continued From page 2 swings out over the steps , no landing is provided , provide a landing that meets the code requirement or reverse the swing of the door.....in addition provide handrails and guardrails at the steps as required by licensure rule .0312 (f). once completed, provide photo's and receipts of the completed work to the DHSR Construction Section as verification of compliance.	{C 105}		
{C 113}	Construction-Door Width SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (j) The door width shall be a minimum of two feet and six inches in the kitchen, dining room, living rooms, bedrooms and bathrooms. This Rule is not met as evidenced by: 1.) At the time of survey it was verified that the doors leading from Bedroom #2 and Bedroom #3 into the shared resident bathroom measure only 24 inches or 2 feet in width, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's and invoices/receipts indicating all work performed to the DHSR Construction Section as verification of compliance. 20190917-ARB At the time of the follow-up survey this deficiency was not corrected.	{C 113}		
C 146	Outside Entrances/Exits-Ramp(s) SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS	C 146		

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C 146	Continued From page 3 (c) At least one principal outside entrance/exit 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 survey it was observed that the homes ramp doesn't discharge at grade as required by the rule, the ramp ends abruptly approximately 2 inches above grade which creates a trip hazard, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 20190917-ARB -At the time of the follow-up survey it was observed that there was evidence that there was an attempt to correct the deficiency but the transition is still too steep and further action is needed to correct this deficiency. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	C 146		
{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	{C 152}		

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{C 152}	Continued From page 4 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 survey it was observed that both scatter and throw rugs were identified in multiple locations, the living room, the kitchen, the front entry, the rear bathroom and the side exit etc., this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 20190917-ARB - At the time of the follow-up survey it was observed that both scatter and throw rugs were identified in multiple locations, the living room, the kitchen, the front entry, the rear bathroom and the side exit etc., this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance.	{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 survey the following observations were found in the rear bathroom	{C 174}		

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{C 174}	Continued From page 5 located between bedrooms #2 and #3; the face plate for the GFCI receptacle is loose in the wall and the toilet is loose at its base, this is not compliant with the rule. Take action to correct the listed deficiency's, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 2.) At the time of survey it was observed that the base of the front left porch column displayed signs of rot, this is not compliant with the rule. Take action to correct the deficiency, once completed, provide photo's to the DHSR Construction Section as verification of compliance. 20190917-ARB - At the time of the follow-up survey these deficiencies were not corrected.	{C 174}		