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 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 laudry 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	6 FCI laundry room	

Vaudhill cfj. 10-18-19

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PATHWAYS II	812 CHARLES TAYLOR ROAD AULANDER, NC 27805

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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	6 FCI	

Vanhill CP 10-18-19

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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PATHWAYS II	812 CHARLES TAYLOR ROAD AULANDER, NC 27805

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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	smoke detector staff	

Vandiver 10-18-19

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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	+ heat detector	

Vandiver CJ 10-18-19

PATHWAYS 11 BIENNIAL SURVEY

C 174 (1) Exhaust fan have been fixed and service and cleaned. Fan is working properly. Staff will make sure fan is clean and working properly daily. Exhaust fan was cleaned and fixed on 10-11-19.

(2) The side door and the rear door knob have been replaced as of 10-11-19.

(3) a. The GFCI will be put in the laundry room by 10-31-19, by and licensed electrician.

b. A licensed electrician have fixed the exposed wire below the electrical panel. It was done on 10-11-19.

c. The water heater relief pipe will be secure by a licensed plumber by 10-31-19.

d. The blue and yellow utility cord have been removed. Staff will make sure there will be no cords on the premises used as permanent cords.

(4) a. Wasp nests have been removed. Staff will monitor facility for wasps' nest anywhere weekly.

b. The cover has been replaced for baseboard heater in bedroom #2 as of 10-10-19. Staff will continue to monitor baseball heater on a weekly basis to ensure the baseboard heaters are in correct order.

c. Bedroom #2 will be painted by 10-31-19. Staff will monitor paint on walls on a weekly basis.

d. The door is fixed and it latches as of 10-11-19. Staff will monitor daily for the latching of doors.

(5) Window have been replaced as of 10-11-19.

(6) Shoe molding have been replaced in the hallway. Staff will monitor shoe molding around walls daily and replace when needed.

(7) Bathroom #3 receptacle have been replaced as of 10-13-19.

(8) There is no bathroom #4. But all the walls around the shower of the bathroom that we have. Showers have been caulked and repaired as of 10-17-19.

(9) Window have been replaced as of 10-11-19.

(10) a. The door knob system has been fixed. Staff will monitor all doors in the facility to ensure that they latch and lock properly.

b. The door slide bolt latch has been removed as of 10-11-19. Staff will make sure that there are no slide bolt latches on any doors in the facility.

c. The window of the staff bedroom has been replaced as of 10-11-19.

d. The smoke detector will be fixed or replaced by 10-31-19, by a licensed election. The staff will monitor smoke detectors quarterly.

Vadhlff Cy 10-18-19

e. Facility has been licensed since the eighties. It has been assessed by building inspectors, fire inspectors, and adult home specialist. Never with the recommendation to have a smoke detector outside the staff bedroom door.

(11) Receptacle in the living room area have been repaired as of 10-11-19. Staff will monitor all receptacles in the facility daily.

(12) a. The exposed electrical wires and heat detector will be fixed by 10-31-19.

(13) Facility has been licensed since the eighties. It has been assessed by building inspectors, fire inspectors, and adult home specialist. Never with the recommendation to have a heat detector in the attic space above the addition accessible through the staff room.

(14) The flooring will be corrected in the facility by 10-31-19.

(15) There were night lights throughout the facility, but additional night lights have been added as of 10-11-19. Staff will check night light daily to assure they are working properly.

(16) Storm door at front has been fixed as of 10-11-19. Staff will make sure storm doors at the facility will work properly.

Signature

10-18-19

Date