9197 36599 PRINTED: 05/30/2019
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL046030	A. BUILDING: 01 B. WING	05/01/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CONFIDENCE BUILDERS II	1135A AHOSHIE-COLFIELD ROAD COFIELD, NC 27922

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C 000	Initial Comments Report by Luis Padilla DHSR Construction Section conducted a Biennial Survey on May 1, 2019 from 12:00 PM to 1:15 PM at the above referenced facility. DHSR records indicate the home was first licensed on February 16, 2017 as a Family Care Home for five (5) ambulatory residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the applicable portions of the 2012 North Carolina Building Code - Section 425.2 - 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 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.	C 152		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Carolyn Hall
TITLE: administrator
(X6) DATE: July 1, 2019

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C 152	Continued From page 1 This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the vinyl floor covering for Bedroom 2 is becoming detached at the left rear corner of the room. This is not compliant with the rule.	C 152	Administrator will make sure the left rear corner vinyl floor is attached to floor	9/30/19
C 153	Houskeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the wallpaper for the two bathrooms of the home is becoming detached from the wall. This is not compliant with the rule.	C 153	Administrator will make sure that the wallpaper in bathroom two is attached to wall or repainted	9/30/19
C 169	Fire Safety-Smoke Detectors SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (b) The building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup. Note: Smoke detectors are required to be	C 169		

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C 169	Continued From page 2 interconnected by this Rule. The application of the Rule permits the heat detectors to be interconnected with smoke detectors, but does not require it. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that there was no smoke detector installed for the Staff Bedroom of the home. This is not compliant with the rule. 2. At the time of the survey it was observed that the smoke detector for the laundry room located immediately outside of the Staff Bedroom, was missing. This is not compliant with the rule. 3. At the time of the survey it was observed that the heat detector for the home is rated for 135 degrees Fahrenheit and wouldnt activate when tested. This is not compliant with the rule. 4. At the time of the survey it was observed that the smoke detector located in the hallway of the home is not interconnected with the other devices. This is not compliant with the rule.	C 169	The administrator will make sure the smoke detectors is installed in the Staff bedroom The administrator will make sure that the heat is greater than 135 degrees Farheit and can be tested The administrator will make sure that the smoke detector in the hallway is interconnected with the other devices	9/30/19 9/30/19 9/30/19
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.	C 174		

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C 174	Continued From page 3 This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the fire extinguishers for the home were not being inspected on a monthly basis by staff. This is not compliant with the rule. 2. At the time of the survey it was observed that there was a hole in the dryer duct of the home. This is not compliant with the rule. 3. At the time of the survey it was observed that the dryer discharges into the utility room of the home and not outside. This is not compliant with the rule. 4. At the time of the survey it was observed that the floor around the washing machine is starting to give away. This is not compliant with the rule. 5. At the time of the survey it was observed that the Hot Water Tank discharge valve is greater than 6 inches off the floor. This is not compliant with the rule. 6. At the time of the survey it was observed that the exhaust register for Bathroom 1 is dirty. This is not compliant with the rule. 7. At the time of the survey it was observed that the receptacle for Bathroom 1 is loose. This is not compliant with the rule. 8. At the time of the survey it was observed that the filter for the return register in the hallway is dirty and needs to be changed and the other return register doesnt have a filter. This is not compliant with the rule. 9. At the time of the survey it was observed that the handrail leading down to the Staff Bedroom	C 174	The administrator will make sure that the fire extinguishers are inspected monthly by staff The administrator will make sure that they are no holes in the dryer duct of the home and the dryer duct shall discharge in the outside and a new flexer shall be replaced. The hot water heat duct is in compliant and the bathroom registers shall be cleaned and the receptacle in the bathroom shall be tighten and filter is changed and cleaned	9/30/19 9/30/19 9/30/19

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C 174	Continued From page 4 was loose. This is not compliant with the rule. 10. At the time of the survey it was observed that the sliding glass door in the staff quarters would not open in addition this door provides emergency from this bedroom. This is not compliant with the rule. 11. At the time of the survey it was observed that the hanging lamp in the foyer is hanging too low. This is not compliant with the rule. 12. At the time of the survey it was observed that the handgrips for both Bathrooms of the home were loose. This is not compliant with the rule. 13. At the time of survey it was observed that the pull down stairs to access the attic was in need of repair; unsecure in its opening. This is not compliant with the rule.	C 174	The administrator will make sure that the hand rail in the bedroom is tight and the hanging lamp should be so it is not hanging to low Handgrips tightened in Both bathrooms. Pull down stair repaired to attic and a night light will be installed in each room	9/30/19 9/30/19 9/30/19
C 179	Building Service Equipment-Night Lights SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (e) All resident areas shall be well lighted for the safety and comfort of the residents. The minimum lighting required is: (3) 1 foot-candle power at the floor for corridors at night. (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 were no night lights installed in the hallway of the home. This is not compliant with the rule.	C 179		

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C 183	Continued From page 5	C 183		
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 where the ramp landing abuts the back porch is less than 80 inches as required by code. This is not compliant with the rule. 2. At the time of the survey it was observed that the front porch handrails were loose. This is not compliant with the rule.	C 183	The administrator there will be a warning sign and painted yellow and the front porch handrails shall be tighten	9/30/19 9/30/19