STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL091017	A. BUILDING: **01** B. WING _____	R **09/21/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RISING HOPE HEALTH CARE SERVICES	**233 GHOLSON AVENUE HENDERSON, NC 27536**

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{C 000}	Initial Comments Report by Jonathan Gamsey DHSR Construction Section conducted a Biennial Follow-up Survey on September 21, 2023 from 9:20 AM to 9:45 AM at the above referenced facility. At the time of the survey not all deficiencies were corrected thefore further action is required. Addtional deficiencies were also observed. NOTES: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with onsite staff during the exit interview. There were previous deficiencies that were not closed out from an open biennial survey, these deficiencies were brought forward from previous survey. 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 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	{C 105}		

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{C 105}	Continued From page 1 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 the survey it was observed that none of the residents responded and evacuated at the time the fire alarm was activated. This is not compliant with the rule. Take the necessary steps to train the residents to respond and evacuate at anytime the alarms are sounded. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected, take action to correct the deficiency and provide verification to our office indicating compliance.	{C 105}		
{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.	{C 147}		

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{C 147}	Continued From page 2 This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that the storm door at the upstairs exit had a deadbolt lock. This is not compliant with the rule. Take the necessary steps to disable the deadbolt. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected, take action to correct the deficiency and provide verification to our office indicating compliance.	{C 147}		
{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 there were scatter rugs in multiple locations of the interior and exterior of the house. This is not compliant with the rule. Take the necessary steps to remove all of the scatter rugs. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected, take action to correct the deficiency and provide verification to our office indicating compliance.	{C 152}		
{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 3 (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 fire extinguishers were not being monitored every month. This is not compliant with the rule. Take the necessary steps to have the staff check the extinguishers monthly and date and initial the tags. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected. 2.) At the time of the survey it was observed that there were open junction boxes in the attic. This is not compliant with the rule. Take the necessary steps to cap the open junction boxes properly. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected. 3.) At the time of the survey it was observed that the dryer vent pipe in the basement was disconnected and the vent was also a flex pipe material. This is not compliant with the rule. Take the necessary steps to install a hardpipe for the dryer vent and reconnect the pipe to the exhaust vent. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected. 4.) At the time of the survey it was observed that there was chipping and peeling paint all around the exterior of the house. (Windows, siding, trim	{C 174}		

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{C 174}	Continued From page 4 boards porch areas). This is not compliant with the rule. Take the necessary steps to scrape all chipping paint and reapply as needed. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected. 5.) At the time of the survey it was observed that the vinyl siding was dirty mildewed. This is not compliant with the rule. Take the necessary steps to powerwash the house. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected. 6.) At the time of the survey it was observed that there were two sections of handrails on the side ramp that were missing. This is not compliant with the rule. Take the necessary steps to replace the rails. * September 21, 2023 - At the time of the follow-up Survey it was identified that the previous deficiency has not been corrected. *New deficiencies* 7.) At the time of the survey, it was observed that the rear bathroom outlet cover above the toilet was damaged, and could potentially cause a safety concern of electrical shock. This is not compliant with the rule. Take the necessary steps to replace the cover. 8.) At the time of the survey, it was observed that the right side bathroom had damaged and peeling walls. This is not compliant with the rule. Take the necessary steps to properly prep and paint the walls. 9.) At the time of the survey, it was observed that	{C 174}		

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{C 174}	Continued From page 5 the right side bathroom has soft flooring around the toilet and tub. This could be caused by water damage. This is not compliant with the rule. Take the necessary steps to properly inspect and repair the area around the tub and toilet to ensure the safety of the staff and residents.	{C 174}		