STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL096038	A. BUILDING: **01** B. WING _____	**09/13/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MORNING GLORY FAMILY CARE	**112 SOUTH CHURCH STREET EUREKA, NC 27830**

(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 Jonathan Gamsey DHSR Construction Section conducted a Biennial Survey on September 13, 2023 from 9:30 AM to 10:15 AM at the above referenced facility. DHSR records indicate the home was first licensed on November 14, 1996 as a Family Care Home for six (6) ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 1992 "Rules for Family Care Homes Minimum and Desired Standards and Regulations," applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1996 North Carolina State Building Code - Section 419.2 - Residential Care Homes. 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with the on-site staff during exit interview. 2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, reciepts, invoices, ect for all work performed. 3.) The cited deficiencies are as follows.	C 000		
C 172	Fire Safety-Four Rehearsals SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies	C 172		

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C 172	Continued From page 1 furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that the facility was not conducting fire drills on the third shift. This is not compliant with the rule. Take the proper steps to ensure fire drills are taking place during all shifts to help ensure the safety of the residents.	C 172		
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 the survey, it was observed that the filters for the air returns were dirty and clogged preventing clean airflow for the HVAC unit. This is not compliant with the rule. Take the necessary steps to install clean air filters and change them out a regular intervals so the HVAC unit can function properly. 2.) At the time of the survey, it was observed that the door knob in bedroom #3 is loose. This is not compliant with the rule. Take the necessary steps	C 174		

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C 174	Continued From page 2 to fasten the door knob. 3.) At the time of the survey, it was observed that the door on bedroom #1 was not latching. This is not compliant with the rule. Take the necessary steps to ensure the door can latch for the privacy of the resident. 4.) At the time of the survey, it was observed that the kitchen outlet is using an unapproved multiple plug extension. This is not compliant with the rule. Take the necessary steps to utilize a UL-rated outlet extender. 5.) At the time of the survey, it was observed that a foundation vent screen on the left side of the building was missing. This is not compliant with the rule. Take the necessary steps to install a new filter to prevent pest from entering the home. 6.) At the time of the survey, it was observed that an exit sign leading into the living quarters for the staff had an exit sign with a step-down. This is not compliant with the rule. Remove the exit sign and ensure residents understand the proper points of egress from the building.	C 174		
C 180	Building Service Equipment-Call System SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (f) Where the bedroom of the live-in staff is located in a separate area from residents' bedrooms, an electrically operated call system shall be provided connecting each resident bedroom to the live-in staff bedroom. The resident call system activator shall be such that it can be activated with a single action and remain	C 180		

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C 180	Continued From page 3 on until deactivated by staff. The call system activator shall be within reach of resident lying on his bed. (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 call system is not working as intended being able to be deactivated by a receiver. This is not compliant with the rule. Take the necessary steps to change the programming of the digital call system and or replace the system so that it can only be deactivated by the original call button that was pressed by the resident.	C 180		