

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL046028	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/27/2023
NAME OF PROVIDER OR SUPPLIER DOUGLAS FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 1439 US 13 S AHOSKIE, NC 27910		
(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 27, 2023 from 1:35 PM to 2:45 PM at the above referenced facility. DHSR records indicate the home was first licensed on July 10, 2014 as a Family Care Home for four (4). Family home increased capacity on August 21, 2021 to five (5) on ambulatory Residents (who are 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 2005 Rules (10A NCAC 13G) for Family Care Homes and the 2012 North Carolina State 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 112	Construction-Res. Areas Same Floor Level SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (i) In homes licensed on or after April 1, 1984, all required resident areas shall be on the same floor	C 112		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 112	Continued From page 1 level. Steps between levels are not permitted. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that the washer and dryer were on another level, locked behind a door. All resident areas shall be on the same floor level. steps between levels are not permitted. This is not compliant with the rule. Residents have the right to do their laundry and or protocol for the house needs to address that staff completes all laundry in the residence.	C 112		
C 126	Bedrooms-Sufficient In Number SECTION .0300 - THE BUILDING 10A NCAC 13G .0308 BEDROOMS (a) There shall be bedrooms sufficient in number and size to meet the individual needs according to age and sex of the residents, the administrator or supervisor-in-charge, other live-in staff and any other persons living in a family care home. Residents are not to share bedrooms with staff or other live-in non-residents. (b) Only rooms authorized by the Division of Facility Services as bedrooms shall be used for bedrooms. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that a foldable bed was near the rear exit of the home. Staff commented that they will use it to sleep on. This does not give proper privacy to the staff. This is not compliant with the rule. Take the necessary steps to have 24-hour staff, and or make accommodations where the staff has a room that meets the building code, as well as any additional accommodations to meet rules.	C 126		

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C 137	Continued From page 2	C 137		
C 137	Bathroom-Mechanical Ventilation SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (g) The bathrooms shall be lighted to provide 30 foot candles of light at floor level and have mechanical ventilation at the rate of two cubic feet per minute for each square foot of floor area. These vents shall be vented directly to the outdoors. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that in the rear bedroom, the attached bathroom does not have mechanical ventilation. This is not compliant with the rule. Take the necessary steps to install mechanical ventilation at the rate of two cubic feet per minute for each square foot of floor area, that is vented directly to the outdoors.	C 137		
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 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.	C 172		

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C 172	Continued From page 3 Take the proper steps to ensure fire drills are taking place during all shifts to help ensure the safety of the residents. 2.) At the time of the survey, it was observed that one of the two clients responded and evacuated when the smoke detectors were activated. This is not compliant with the rule. Take the necessary steps to train the clients to respond and evacuate anytime the smoke detectors sound. The clients need to be able to respond and evacuate without staff prompting or assistance.	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 laundry room floor was torn. This is not compliant with the rule. *This deficiency was previously cited during our 2021 biennial survey and action hasn't been taken to address the deficiency. 2.) At the time of the survey it was observed that the GFCI receptacle in the hall bath is not correctly wired. This is not compliant with the rule. *This deficiency was previously cited during our 2021 biennial survey and action hasn't been taken to address the deficiency.	C 174		

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C 174	Continued From page 4 * New Defnenicies * 3.)At the time of the survey it was observed that there was wood paneling being used as wall covering in parts of the room the washer and dryer are near the rear exit. This paneling does not provide the minimum Class C finish required by the building code. This is not compliant with the rule. Take the necessary steps to treat the paneling with a fire-retardant material capable of achieving a minimum of a Class C finish. 4.) At the time of the survey, it was observed that the light was out near the rear exit. This is not compliant with the rule. Take the necessary steps to replace the bulb. 5.) At the time of the survey, it was observed that the floor in the kitchen was bubbling near the oven. This is not compliant with the rule. Take the necessary steps to mend the flooring and or replace it if needed. 6.) At the time of the survey, it was observed that there was a window air conditioner blocking the emergency egress window in the bedroom to the right near the office.. Which could impede proper evacuation in the event of an emergency. This is not compliant with the rule. Take the necessary steps to remove the fixture to ensure proper pathing to the window in the event of an emergency. *Fixed at the time of the survey. 7.) At the time of the survey it was observed that the window in the 2nd bedroom to the left the window does not open. Which could impede proper evacuation in the event of an emergency.	C 174		

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C 174	Continued From page 5 This is not compliant with the rule. Take the necessary steps to repair and or replace the window if needed. *Fixed at the time of the survey 8.) At the time of the survey, it was observed that the door was not properly latching in the 2nd bedroom to the left. This is not compliant with the rule. Take the necessary steps to ensure that the door is latching properly for the privacy of the residents. *Fixed at the time of the survey 9.) At the time of the survey, it was observed that the bathroom in the hallway had a missing bulb. This could cause electrical shock. This is not compliant with the rule. Take the necessary steps to ensure we are not leaving empty sockets, and replacing a bulb when they are burnt out. 9.) At the time of the survey it was observed that in the attic the bathroom exhaust flex duct is not attached. This is not compliant with the rule. Take the necessary steps to ensure the flex duct is properly attached to ensure proper exhaust. 10.) AT the time of the survey, it was observed that in the attic the window is broken in multiple spots, which could allow water penetration and or pests. This is not compliant with the rule. Take the necessary steps to repair and or replace a window if needed. 11.) AT the time of the survey, it was observed that in the attic one of the joists was broken off. This could cause structural damage. This is not compliant with the rule. Take the necessary steps to replace the joist and or verify with a structural engineer that the joist is not needed and provide documentation to DHSR.	C 174		

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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 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 was not working as intended. The call system rings to the receiver twice then deactivates on it's own, and gives no announcement on what room to button was activated in. 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		
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:	C 183		

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C 183	Continued From page 7 1.) At the time of the survey it was observed that there was a drop-off at the base of the ramp. This is not compliant with the rule. Take the necessary steps to build up the grading to the same level to eliminate the drop-off. *New Defneincies* 2.) At the time of the survey it was observed that the home has multiple foundation cracks on the rear left, the right side and at the brick flower bed. This could lead to further expantation and or water instruction and pest. This is not compliant with the rule. Take the necessary steps to repair, replace and or seek a professional opinion on the next steps. 3.) At the time of the survey, it was observed that the front screen door had a rip in the screen. This is not compliant with the rule. Take the necessary steps to repair the screen and or replace it. 4.) At the time of the survey, it was observed that the front deck board was buckling in two locations. This could be caused by water damage or another source. This is not compliant with the rule. Take the necessary steps to find the root cause and monitor the bucking to see if further repair and or replacement is needed. 5.) At the time of the survey, it was observed that multiple areas of the fascia around the home need repair or replacement. This is not compliant with the rule. Take the necessary steps to repair or replace. 6.) At the time of the survey it was observed that multiple areas of the soffit need repair and paint. This is not compliant with the rule. Take the	C 183		

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C 183	Continued From page 8 necessary steps to repair and repaint areas that are in distress. 7.) At the time of the survey, it was observed that multiple window sills are deteriorating and frames need to be painted. This could cause water instruction. This is not compliant with the rule. Take the necessary steps to repair and or replace if needed, and paint the windows to help prevent deterioration. 8.) At the time of the survey, it was observed that near the ramp two metal posts two inches high out of the ground are exposed and could potentially be a trip hazard. This is not compliant with the rule. Take the necessary steps to remove it. 9.) At the time of the survey it was observed that the storage shed on the left side is not secured and the hasp is broken off. this is not compliant with the rule. Take the necessary steps to replace the hasp and or fasten the existing one if possible. 10.) At the time of the survey, it was observed that a vehicle is abandoned on the property and could be a harbinger of pests and pose a safety concern for residents and or staff. This is not compliant with the rule. Take the necessary steps to remove the abandoned vehicle and or bring it back to working condition with state registration.	C 183		