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 _____	**01/03/2024**

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

(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 January 03, 2024 from 12:30 PM to 2:35 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 071	10A NCAC 13G .0314 (a) 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	C 071		

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C 071	Continued From page 1 to be easily cleanable This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that within the facility multiple areas are missing transition strips from one type of flooring to another. This could potentially lead to a tripping hazard. This is not compliant with the rule. Take the necessary steps to install transition strips to help prevent trips and falls.	C 071		
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 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.	C 105		

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C 105	Continued From page 2 This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the laundry room does not have a GFCI. Per 210.8(A) states " Dwelling Units. All 125-volt, single-phase, 15- and 20-ampere receptacles installed in the locations specified in 210.8(A)(1) through (10) shall have ground-fault circuit-interrupter protection for personnel. " This is not compliant with the rule. Take the necessary steps to reach out to a certified professional to install a GFCI in the laundry room for the washer. 2.) At the time of the survey it was observed that there was wood paneling being used as a wall covering in the dining room. 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. * Staff provided documentation that Flame Control 133A was being utilized and it was observed that it was not applied as intended per the data sheet. Flame control 133A requires the wood to be scored.	C 105		
C 146	Outside Entrances/Exits-Ramp(s) SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (c) At least one principal outside entrance/exit for the residents' use shall be at grade level or accessible by ramp with a one inch rise for each 12 inches of length of the ramp. For the purposes of this Rule, a principal outside entrance/exit is one that is most often used by	C 146		

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C 146	Continued From page 3 residents for vehicular access. If the home has any resident that must have physical assistance with evacuation, the home shall have two outside entrances/exits at grade level or accessible by a ramp. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the rear exterior ramp transition to grade is not even and could potentially lead to a tripping hazard. This is not compliant with the rule. Take the necessary steps to build the grade up to the lip of the end of the ramp to ensure an even transition.	C 146		
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, per a conversation with the provider the residents have had bed bugs. This is not compliant with the rule. Take the necessary steps to provide documentation of the treatment plan and the state of the infestation from a certified pest technician. 2.) At the time of the survey, it was observed that multiple Gnats were found in the bedrooms as	C 153		

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C 153	Continued From page 4 well as the hallway. This is not compliant with the rule. Take the necessary steps to find the root cause and monitor to prevent further pest concerns.	C 153		
C 168	Fire Extinguishers SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (a) Fire extinguishers shall be provided which meet these minimum requirements in a family care home: (1) one five pound or larger (net charge) "A-B-C" type centrally located; (2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and (3) any other location as determined by the code enforcement official. 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 checked by the staff monthly to evaluate the status of the extinguishers. This is not compliant with the rule. Take the necessary steps to have the staff inspect the extinguishers once a month and date the tags accordingly to prevent the extinguisher from becoming damaged or losing its charge and being unusable in a time of need.	C 168		
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	C 169		

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C 169	Continued From page 5 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 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 smoke detectors in the facility are not interconnected, nor hardwired. As well as multiple smoke detectors in the facility do not sound as intended. Per the 200 international fire code - section 907. There must be a minimum of one 120-volt smoke detector permanently connected to the house current with battery back-up, installed in each sleeping room, outside of each separate sleeping area. All smoke detectors shall be interconnected so that the actuation of one alarm will actuate all alarms. This is not compliant with the rule. Take the necessary steps to install hardwired, interconnected devices in each bedroom, and outside of each sleeping area.	C 169		
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 6 This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the window in bedroom #3 was not able to stay open on its own. Which could impede proper evacuation in the event of an emergency. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 2.) At the time of the survey it was observed that bedroom #2 light fixture was missing a globe. This is not compliant with the rule. Take the necessary steps to install a new light globe. 3.) At the time of the survey, it was observed that the bedroom #2 door is off the hinge at the bottom. This could potentially lead to injury as well as affect the privacy of the residents in the room. This is not compliant with the rule. Take the necessary steps to repair and or replace components as needed. 4.) At the time of the survey, it was observed that bedroom #1 door is not latching as intended. This could potentially lead to privacy issues for the residents in the room. This is not compliant with the rule. Take the necessary steps to ensure that the door latches as intended. 5.) At the time of the survey, it was observed that bedroom #1 light fixture had open sockets. This could potentially lead to electrical shock. This is not compliant with the rule. Take the necessary steps to ensure all light fixtures have a bulb in the sockets at all times. 6.) At the time of the survey, it was observed that the bedroom #1 window on the left-hand side of the room was not opening as intended. Which could impede proper evacuation in the event of	C 174		

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C 174	Continued From page 7 an emergency. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 7.) At the time of the survey, it was observed that the bedroom #1 flooring leading into the bathroom was soft and could potentially lead to injury. This is not compliant with the rule. Take the necessary steps to find the root cause repair the flooring and monitor as needed. 8.) At the time of the survey, it was observed that bedroom #1 bathroom has soft flooring in front of the toilet that could potentially lead to injury. This is not compliant with the rule. Take the necessary steps to find the root cause repair the flooring and monitor as needed. 9.) At the time of the survey, it was observed that the hallway bathroom flooring in front of the toilet was soft and could potentially lead to injury. This is not compliant with the rule. Take the necessary steps to find the root cause repair the flooring and monitor as needed. 10.) At the time of the survey, it was observed that the outlet in the living room was coming out of the wall near the window. This is not compliant with the rule. Take the necessary steps to secure the outlet properly to the wall. 11.) At the time of the survey, it was observed that the kitchen flooring was soft in front of the oven. This is not compliant with the rule. Take the necessary steps to find the root cause repair components as needed and monitor as needed. 12.) At the time of the survey, it was observed that the oven exhaust has an open socket, which could potentially lead to electrical shock. This is	C 174		

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C 174	Continued From page 8 not compliant with the rule. Take the necessary steps to replace all open sockets with a bulb. 13.) At the time of the survey, it was observed that the oven exhaust was missing a bulb cover this is not compliant with the rule. Take the necessary steps to install a bulb cover. 14.) At the time of the survey, it was identified that the joints of the kitchen range hood ductwork were sealed with cloth-type tape. This is not compliant with the rule. Take the proper steps to properly seal the seams with an approved metallic tape to ensure proper exhaust. 15.) At the time of the survey, it was observed that the laundry room flooring was soft in front of the staff bedroom door. This could potentially lead to injury. This is not compliant with the rule. Take the necessary steps to find the root cause, replace components as needed and monitor. 16.) At the time of the survey, it was observed that the transition strip leading to the staff bedroom was no longer secured. This is not compliant with the rule. Take the necessary steps to secure the transition strip. 17.) At the time of the survey, it was observed that the face plate to an outlet in the staff bedroom was missing. This could potentially lead to electrical shock. This is not compliant with the rule. Take the necessary steps to replace the face plate 18.) At the time of the survey, it was observed that the sliding glass door in the staff bedroom is not working as intended and has a damaged gland that could potentially lead to injury in a time of need. This is not compliant with the rule. Take	C 174		

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C 174	Continued From page 9 the necessary steps to repair, and or replace the sliding glass door. 19.) At the time of the survey, it was observed that in the staff bedroom, an extension cord was being used. This is not compliant with the rule. Take the necessary steps to remove the extension cord and if needed install a surge protector. 20.) At the time of the survey, it was observed that the exterior of the house was dirty and had mildew. This is not compliant with the rule. Take the necessary steps to power wash the house. 21.) At the time of the survey, it was observed that the back deck ceiling had multiple soffit's that showed signs of rot. This could potentially lead to further damage. This is not compliant with the rule. Take the necessary steps to repair and or replace and paint as needed. 22.) At the time of the survey, it was observed that the stairs in the rear of the facility were showing signs of rot. This is not compliant with the rule. Take the necessary steps to repair and or replace as needed 23.) At the time of the survey, it was observed that the flashing and soffit were showing signs of rot. This is not compliant with the rule. Take the necessary steps to repair, and or replace any components of the soffit and flashing that are showing signs of rot and paint as needed. 24.) At the time of the survey, it was observed that multiple windows are showing signs of rot and or need to be caulked to work as intended. This is not compliant with the rule. Take the necessary steps to repair and or replace windows	C 174		

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C 174	Continued From page 10 to ensure they work as intended. 25.) At the time of the survey, the floodlight near the staff sliding glass door is missing a bulb. This could potentially lead to electrical shock. This is not compliant with the rule. Take the necessary steps to ensure all sockets have a bulb in them. 26.) At the time of the survey, it was observed at the front of the building the left railing was loose. This is not compliant with the rule. Take the necessary steps to repair and or replace the railing. 27.) At the time of the survey, it was observed that the dryer flaps at the rear of the facility were damaged. This is not compliant with the rule. Take the necessary steps to repair and or replace the dryer flaps to prevent pests from entering the facility.	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 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.	C 180		

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C 180	Continued From page 11 This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the rules above are not being met and the call buttons are not working as intended. This is not compliant with the rule. Where the bedroom of the live-in staff is 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 the resident lying on his bed. For any wireless system to be approved, the base unit must use the house power, must recognize when any of the activators stop providing a signal, and must function in accordance with the intent of the Rules.	C 180		