

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL081032	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 02/01/2024
NAME OF PROVIDER OR SUPPLIER JOYFUL HOME FAMILY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 113 BEACON HILL ELLENBORO, NC 28040		
(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 Scott Greenwood DHSR Construction Section conducted a Biennial Survey on February 1, 2024 from 9:10 AM to 10:20 AM at the above referenced facility. DHSR records indicate the home was first licensed on December 06, 1988 as a Family Care Home for six (6) Ambulatory Residents ambulatory residents (able to respond and evacuate without 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 1984 (87 Rev) Minimum Standards and Regulations for Family Care Homes, the applicable portions of the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 1978 (Rev 8) North Carolina State Building Code - Section 409.1 (g) - Residential Care facilities 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 101	Existing Licensed-No Less than '71 Rules SECTION .0300 - THE BUILDING 10A NCAC 13G .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each family	C 101		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 care home shall be applied as follows: (2) Except where otherwise specified, existing licensed homes or portions of existing licensed homes shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration; however, in no case shall the requirements for any licensed home, where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Family Care Homes", copies of which are available at the Division of Health Service Regulation - Construction Section, 701 Barbour Drive, Raleigh, North Carolina 27603 at no cost; This Rule is not met as evidenced by: 1 At the time of the survey it was observed that the bedroom smoke detectors were not interconnected to the hallway smoke detectors. This is not compliant with the rule for routine interior maintenance and resident safety. Take the necessary steps to interconnect the bedroom smoke detectors with the hallway smoke detector. Note; All resident bedroom smoke detector tested and functioning at the time of the survey.	C 101		
C 110	Construction-Basement, Attic SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (g) The basement and the attic shall not to be used for storage or sleeping. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that	C 110		

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C 110	Continued From page 2 the basement was being used for storage. This is not compliant with the rule per General Construction and Maintenance (10 NCAC 42C .2102 Section C Item # 4. Take the necessary steps to correct this deficiency.	C 110		
C 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the Fire and Sanitation reports were not on-site for review. This is not compliant with the rule. Take the necessary steps to provide our office copies of requested reports and take measures to ensure that in the future copies are on-site as requested.	C 117		
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	C 174		

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C 174	Continued From page 3 the stove hood light cover was missing. This is not compliant with the rule for routine interior maintenance and resident safety. Take the necessary steps to correct this deficiency. 2. At the time of the survey it was observed that there was lint buildup and debris behind the clothes dryer. This is not compliant with the rule for routine interior maintenance. Take the necessary steps to correct this deficiency. 3. At the time of the survey it was observed that there was dust buildup on the ceiling fan blades in the front corner bedroom. This is not compliant with the rule for routine interior maintenance and appearance. Take the necessary steps to correct this deficiency. 4. At the time of the survey it was observed that the front corner bedroom egress door window blind was damaged . This is not compliant with the rule for routine interior maintenance and resident privacy. Take the necessary steps to correct this deficiency. 5. At the time of the survey it was observed that the hallway bathroom switch cover plate was missing. This is not compliant with the rule for routine interior maintenance and resident safety. Take the necessary steps to correct this deficiency. 6. At the time of the survey it was observed that there was dust buildup at the air return filter and grill. This is not compliant with routine interior maintenance and appearance. Take the necessary steps to correct this deficiency. 7 At the time of the survey it was observed that there were exposed wires in the attic. This is not	C 174		

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C 174	Continued From page 4 compliant with the rule for routine interior maintenance and safety. Take the necessary steps to correct this deficiency. 8. At the time of the survey it was observed that the egress window in the rear center bedroom was partially blocked by the bed. This is not compliant with the rule for a clear path to the egress window during the event of a fire emergency. Take the necessary steps to keep the area in front of the egress window clear at all times. 9. At the time of the survey it was observed that there was dirt buildup at the vinyl siding and trim. This is not compliant with the rule for routine exterior maintenance and appearance. Take the necessary steps to power wash the house. 10. At the time of the survey it was observed that there was peeling trim board paint at the left hand side bump out. This is not compliant with the rule for routine exterior maintenance and appearance.	C 174		