

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL092236	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 02/20/2024
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

CARE INNOVATIONS OF NORTH CAROLINA

**2409 HORTON ROAD
KNIGHTDALE, NC 27545**

(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
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C 000 Initial Comments

Report by David Hickman

DHSR Construction Section conducted a Biennial Survey on February 20, 2024 from 9:00 AM to 10:15 AM at the above referenced facility. DHSR records indicate the home was first licensed on June 02, 2017 as a Family Care Home for four ambulatory Residents (able to respond and evacuate 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 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

C 000

Care innovations of North Carolina has been approved as a 4 bedroom family care home since 2017, including the current sizes dimensions of the windows and two exits. On site inspections has been conducted by both County and State of North Carolina Construction Section. On this note I question deficiencies C144 through an Informal Dispute Resolution (I.D.R) process in accordance with G.S. 131D-2.1(a2)

C 105

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

6899

GUW621

If continuation sheet 1 of 6

Division of Health Service Regulation

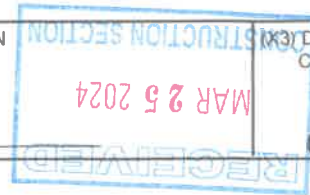
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C 105	Continued From page 1 Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. 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. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that none of the bedrooms had a proper size emergency egress window meeting the minimum code requirements. This is not compliant with the rule. Take the necessary steps to provide at least on properly sized emergency egress window in each bedroom. The minimum window openings in the sleeping rooms shall be 432 square inches. The minimum clear horizontal or vertical opening dimension must be 16". * This deficiency is being carried over from the previous biennial survey.	C 105			
C 144	Outside Entrances/Exits-Two Remote Exits SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (a) In family care homes, all floor levels shall	C 144			

Division of Health Service Regulation

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C 144	Continued From page 2 have at least two exits. If there are only two, the exit or exit access doors shall be so located and constructed to minimize the possibility that both may be blocked by any one fire or other emergency condition. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that both exits for the house are located on the right end of the house and the bedrooms are located on the left side of the house causing the two exits not to be remote from each other. This is not compliant with the rule. Take the necessary steps to provide a remote exit to the outside on the left end of the house. * This deficiency is being carried over from the previous biennial survey.	C 144			
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 fan for the range hood was not working, causing improper ventilation for the cooking area. This is not compliant with the rule. Take the necessary steps to repair or replace the fan so that it works properly.	C 174	① Fan For the Range hood would be repair for proper Ventilation for the Cooking Area.		

Division of Health Service Regulation

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C 000	Initial Comments Report by David Hickman DHSR Construction Section conducted a Biennial Survey on February 20, 2024 from 9:00 AM to 10:15 AM at the above referenced facility. DHSR records indicate the home was first licensed on June 02, 2017 as a Family Care Home for four ambulatory Residents (able to respond and evacuate 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	CARE Innovations of North Carolina has been approved as a 4 bedroom family care home since 2017, including the current sizes, dimensions of the windows and two exits. On site inspections has been conducted by both County and State of North Carolina Construction Section.	
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	C 105	On this note I question deficiencies c144 through an Informal Dispute	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TR [Signature]

TITLE

DIRECTOR

(X6) DATE

3-22-24

If continuation sheet 2 of 6

Division of Health Service Regulation

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Division of Health Service Regulation

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C 174	Continued From page 3 2. At the time of the survey it was observed that the receptacle for the dryer was hanging out of the wall causing possible electrocution. This is not compliant with the rule. Take the necessary steps to secure the receptacle. 3. At the time of the survey it was observed that there were open holes in the electrical panel causing possible electrocution. This is not compliant with the rule. Take the necessary steps to cover the holes properly. 4. At the time of the survey it was observed that the smoke detector in the staff bedroom was hanging loose from the ceiling, which may cause the wires to pull out and the detector not function properly. This is not compliant with the rule. Take the necessary steps to secure the smoke detector. 5. At the time of the survey it was observed that there were multiple deficiencies in the left side bathroom including the following. a) The exhaust vent fan cover was dirty causing improper ventilation. b) The toilet was loose at its base which may cause a possible leak or injury from falling. c) The floor around the toilet was soft and spongy, indicating possible deterioration. This is not compliant with the rule. Take the necessary steps to correct these deficiencies. 6. At the time of the survey it was observed that there was an open junction box in the attic above the door opening causing possible electrocution. This is not compliant with the rule. Take the necessary steps to cover the wires properly. 7. At the time of the survey it was observed that the soffit was damaged and separated at the right	C 174	② Receptacle for the dryer would be secure properly ③ Holes in the Electrical panel would be covered properly. ④ Smoke detector in the staff room would be secure properly. ⑤ Vent fan would be clean for proper ventilation. b. Toilet base would be repair to prevent injury. c. Toilet floor would be repair. ⑥ Junction box in the attic would be cover properly.	5/6/24 5/6/24 5/6/24 5/6/24

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C 174	Continued From page 4 and left rear of the house and the trim on the left gable was damaged and deteriorating. This is not compliant with the rule. Take the necessary steps to replace all deteriorated wood and repair all open areas of the soffit. * This deficiency is being carried over from the previous biennial survey. 8. At the time of the survey it was observed that there were missing bulbs in the exterior flood lights. This is not compliant with the rule. Take the necessary steps to replace the bulbs. * This deficiency is being carried over from the previous biennial survey. 9. At the time of the survey it was observed that the gutters were clogged with leaves causing improper drainage and possible roof damage. This is not compliant with the rule. Take the necessary steps to clean out the gutters. 10. At the time of the survey it was observed that there was a small ramp for an elevation change at the rear door causing a possible trip hazard. This is not compliant with the rule. Take the necessary steps to taper the edges and add a grab bar at each side of the door. 11. At the time of the survey it was observed that there was a broken floorboard on the rear deck and other spongy boards causing a trip or fall hazard. This is not compliant with the rule. Take the necessary steps to replace the floorboards as needed. 12. At the time of the survey it was observed that the dryer vent pipe was disconnected in the crawlspace causing the dryer to vent directly into the crawlspace. This is not compliant with the rule. Take the necessary steps to reconnect the	C 174	⑦ Deteriorated wood will be replace, open areas of the soffit shall be repair. ⑧ Missing bulbs shall be replace ⑨ Gutters would be clean out for proper drainage. 10 Ramp edges would be taper to prevent trip hazard. Grab bar at each side of the door would be installed. ⑪ Floor boards would be replaced. ⑫ Dryer Vent Pipe would be reconnected.	5/6/24 5/6/24 5/6/24 5/6/24 5/6/24 5/6/24

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C 174	Continued From page 5 dryer vent. * This deficiency is being carried over from the previous biennial survey. 13. At the time of the survey it was observed that the vinyl siding was dirty and mildewed. This is not compliant with the rule. Take the necessary steps to clean the siding.	C 174	⑬ Vinyl siding would be clean and maintained.	5/6/24