

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL078106	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/15/2024
NAME OF PROVIDER OR SUPPLIER B & B ASSISTED LIVING # 6		STREET ADDRESS, CITY, STATE, ZIP CODE 2133 PRESTON ROAD MAXTON, NC 28364		
(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 May 15, 2024 from 11:00 AM to 12:20 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 25, 2004 as a Family Care Home for six (6) ambulatory Residents (who are 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 1992 Minimum Standards and Regulations for Family Care Homes, the applicable portions of the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 2002 North Carolina State Building Code - Section 421.2 - 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 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	C 105		

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

TITLE

(X6) DATE

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C 105	Continued From page 1 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. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that only one of the six residents present in the house responded and evacuated at the time the smoke detectors were activated. This is not compliant with the rule due to the home being licensed for all ambulatory clients. Take the necessary steps to train the residents to respond and evacuate, without staff prompting or assistance, at any time the smoke detectors are activated. The residents must perform this take on their own for the home to maintain its ambulatory status. 2.) At the time of the survey, it was observed that per the fire drills logs drills are taking longer than 8 minutes. This is not compliant with the rule due to the home being licensed for all ambulatory clients. Take the necessary steps to train the residents to respond and evacuate, without staff prompting or assistance, at any time the smoke	C 105		

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C 105	Continued From page 2 detectors are activated. The residents must perform this task in under 8 minutes on their own for the home to maintain its ambulatory status.	C 105		
C 147	Outside Entrances/Exits-Single Hand Motion SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the kitchen exit door to the exterior was not a single action. This is not compliant with the rule. Take the necessary steps to alter and or change out the door knob to a single action. 2.) At the time of the survey, it was observed that the rear left door in the facility that leads to the exterior of the facility has a deadbolt and is not a single action. This is not compliant with the rule. Take the necessary steps to remove the deadbolt and install single-action hardware.	C 147		
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails. This Rule is not met as evidenced by:	C 149		

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C 149	Continued From page 3 1.) At the time of the survey, it was observed multiple drop offs at the front of the facility's front deck and sidewalk. This is not compliant with the rule. Take the necessary steps to install handrails and or barriers and or build up the grade for an even transition.	C 149		
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 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 multiple smoke detectors are past the 10-year lifespan. Per NFPA 72 10.4.7 states " that "Smoke Alarms", installed in one and two family dwellings "shall not remain in device for more than ten years from the date of manufacture". This is not compliant with the rule. Take the necessary steps to replace all smoke detectors in the facility that are past the 10-year lifespan and monitor the rest.	C 169		

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C 174	Continued From page 4	C 174		
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 hallway bathroom Mechanical Vent was not working as intended. This is not compliant with the rule. Take the necessary steps to repair and or replace. 2.) At the time of the survey, it was observed that the hallway bathroom faucet for the sink was spraying water on the floor when on. This could potentially become a trip/fall hazard. This is not compliant with the rule. Take the necessary steps to repair and or replace components as needed. 3.) At the time of the survey, it was observed that bedroom #1 had a chair blocking the window. This could potentially block egress in a time of need. This is not compliant with the rule. Take the necessary steps to rearrange the room to ensure egress to the window at all times. 4.) At the time of the survey, it was observed that in bedroom #4 the window was blocked by a dresser. This could potentially block egress in a time of need. This is not compliant with the rules. Take the necessary steps to rearrange the room to ensure egress to the window at all times	C 174		

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C 174	Continued From page 5 5.) At the time of the survey, it was observed that bulbs were burnt out throughout the facility. This is not compliant with the rule. Take the necessary steps to replace bulbs as needed. 6.) At the time of the survey, it was observed that the dining room floor was torn in multiple spots. This is not compliant with the rule. Take the necessary steps to repair and or replace.	C 174		
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: 1.) At the time of the survey, it was observed that the resident's home had neglected gutters. This is not compliant with the rule. Take the necessary steps to clean out the gutters and build a preventative maintenance plan to ensure the gutters are cleaned regularly. 2.) At the time of the survey, it was observed that on the right side of the facility, the soffit and flashing are damaged and or missing. This is not compliant with the rule. Take the necessary steps to repair and or replace as needed. 3.) At the time of the survey, it was observed that the rear porch railing was loose. This is not compliant with the rule. Take the necessary steps to repair and replace components as needed. 4.) At the time of the survey, it was observed that the rear porch had multiple bricks sitting on the	C 183		

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C 183	Continued From page 6 steps, and bricks missing from the steps themselves. This is not compliant with the rule. Take the necessary steps to repair steps and remove unneeded bricks from the facility. 5.) At the time of the survey, it was observed that the rear deck flood light was missing a bulb. This could potentially lead to electrical shock. This is not compliant with the rule. Take the necessary steps to replace the bulb on the flood light. 6.) At the time of the survey, it was observed that the dryer exterior vent was missing a flap. This is not compliant with the rule. Take the necessary steps to replace the flap on the dryer exhaust vent. 7.) At the time of the survey, it was observed that the rear of the facility had multiple damaged chairs, this could potentially cause harm to residents and our staff and or be a harbinger of pests. This is not compliant with the rule. Take the necessary steps to repair and or remove from the facility. 8.) At the time of the survey, it was observed that the facility had a down gutter on the rear of the facility. This is not compliant with the rule. Take the necessary steps to repair the gutter and or remove it if it's no longer needed.	C 183		