STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL078098	A. BUILDING: **01** B. WING _____	**05/15/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
B & B ASSISTED LIVING # 7	**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 10:00 AM to 11:00 AM at the above referenced facility. DHSR records indicate the home was first licensed on January 12, 2005 as a Family Care Home for six (6) Residents with no more than three who are non-ambulatory (unable 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 1992 "Rules for Family Care Homes Minimum and Desired Standards and Regulations," applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2002 North Carolina State Building Code - Section 421.3 - Small 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 105	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION	C 105		

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C 105	Continued From page 1 (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. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that none of the three ambulatory 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 three ambulatory residents and 3 non-ambulatory residents. Take the necessary steps to train the ambulatory 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.	C 105		
C 108	Existing Home Remodeling-Submit Plans	C 108		

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C 108	Continued From page 2 SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (e) Any existing licensed home that plans to have new construction, remodeling or physical changes done to the facility shall have drawings submitted by the owner or his appointed representative to the Division of Health Service Regulation for review and approval prior to commencement of the work. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that there was wood paneling being used as wall covering in part of bedroom #4. 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. * Maintenance at the time of the survey was installing wall coverings in the facility that are not fire-rated. Take the necessary steps to reach out to DHSR before performing physical plant alterations to find out if plans need to be submitted to DHSR.	C 108		
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 that the exterior left exit on the facility only had handrails on one side of the steps. This is not compliant with the rule. take the necessary steps to install handrails on both sides of the steps. 2.) At the time of the survey, it was observed that the ramp and parts of the sidewalk were not to grade. this is not compliant with the rule. Take the necessary steps to build up the grade for a smooth transition and or install a barrier.	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	C 169		

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C 169	Continued From page 4 necessary steps to replace all smoke detectors in the facility that are past the 10-year lifespan and monitor the rest.	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. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the strobe in the hallway on the left side of the facility was not working as intended. This is not compliant with the rule. Take the necessary steps to repair and or replace, it is recommended to utilize a qualified technician to repair the strobe in the facility. 2.) At the time of the survey, it was observed that bedroom #2 window was cracked. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 3.) At the time of the survey, it was observed that bedroom #1 blind was damaged. This could potentially affect the privacy of the residents. This is not compliant with the rule. Take the necessary steps to repair and or replace the blinds. 4.) At the time of the survey, it was observed that bedroom #5 had damaged blinds. This could potentially affect the privacy of the residents. This	C 174		

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C 174	Continued From page 5 is not compliant with the rule. Take the necessary steps to repair and or replace the blinds. 5.) At the time of the survey, it was observed that the bathroom near the front door had a loose faucet. This is not compliant with the rule. Take the necessary steps to secure and or replace if needed. 6.) At the time of the survey, it was observed that the hallway bathroom near bedroom #2 had damaged tiles. This is not compliant with the rule. Take the necessary steps to repair and or replace. 7.) At the time of the survey, it was observed that the staff bedroom had damaged flooring either peeling or missing. This is not compliant with the rule. Take the necessary steps to repair and or replace the flooring. 8.) At the time of the survey, it was observed that the dining room had a missing globe on the light fixture. This is not compliant with the rule. Take the necessary steps to replace it. 9.) At the time of the survey, it was observed that the kitchen had multiple burnt-out bulbs. This is not compliant with the rule. Take the necessary steps to replace the bulbs.	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.	C 183		

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C 183	Continued From page 6 This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the dryer exterior vent is damaged, and no longer connected to the facility. This is not compliant with the rule. Take the necessary steps to repair and or replace if needed. 2.) At the time of the survey, it was observed that the rear door on the exterior door frame had chipping paint. This is not compliant with the rule. Take the necessary steps to remove chipping paint, prep, and paint. 3.) At the time of the survey, it was observed that the rear of the facility has septic tank access that is covered by plywood. This is not compliant with the rule. Take the necessary steps to install a proper barrier to prevent individuals from falling into the hole and or properly cover to potentially protect residents/staff from a trip/fall hazard.	C 183		