

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

FCL046030

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: 01

B. WING

(X3) DATE SURVEY
COMPLETED

01/03/2024

NAME OF PROVIDER OR SUPPLIER

CONFIDENCE BUILDERS II

STREET ADDRESS, CITY, STATE, ZIP CODE

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)

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PROVIDER'S PLAN OF CORRECTION
(EACH CORRECTIVE ACTION SHOULD BE
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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 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 000

C 071

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

Carolyn Hall

TITLE

administrator

(X6) DATE

05/02/24

STATE FORM

6899

5CB521

If continuation sheet 1 of 12

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

Division of Health Service Regulation
STATE FORM

Division of Health Service Regulation

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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	Administrator will ensure The laundry room need a GFCI (125 volt single phase 15-20ampere receptacle installed with a ground fault and make sure the wood paneling being used as wall covering in dining room and paneling have a class C finish required by the building code and the outside entrance exit for the resident 12 inches of length of the ramp	4/1/30 Done 5/15/30 Done LCH Done
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 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

to go off and be interconnected

Done

Administrator will make sure you have interconnected hardwired smoke detectors so that the actuation of one alarm will actuate all alarms

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 153

Continued From page 4

C 153

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 168

Fire Extinguishers

C 168

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 169

Fire Safety-Smoke Detectors

C 169

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

Get rid of as well as making sure the fire extinguishers are being signed and checked monthly and Done the smoke detectors will be required

Administrator will make sure fire extinguishers are checked monthly Done

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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	Administrator will ensure ensure steps steps are replaced	Done
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	administrator will ensure The necessary steps are provided and documented of the treatment plan The administrator will ensure all gnats	Done Done

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C 174

Continued From page 6

C 174

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

The administrator will make sure bedroom 3 window is able to stay open on its own and all missing globes shall be installed. Bedroom 2 door is put back on hinges bedroom 1 door is not latching it will be latched and bedroom #1 light fixtures had open sockets this will be replaced. Bedroom #1 window on left hand side of room open correctly.

Done

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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

Administrator will replace oven exhaust bulb and cover installed with approved metallic tape to ensure proper exhaust and laundry room flooring was soft in front of the staff bedroom door and transition strip leading to the staff bedroom was secured and face plate to an outlet in the staff bedroom replaced and the sliding glass door in the staff bedroom is steps to replace or repair

Done

4/30

4/30

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C 174	Continued From page 9 the necessary steps to repair, and or replace the sliding glass door.	C 174		
✓	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.		Administrator will ensure all extension cords are not used	Done
✓	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.		Administrator will ensure the exterior of the house has all mildew removed	4/30
✓	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.		Administrator will was and paint all replace soffit	Done
✓	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		Administrator will make sure stairs are replaced & all soffit repaired and replaced and painted as needed	Done
✓	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.		and windows with signs of rot or need caulking to work as intended	
✓	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			

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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	<i>The bulb will be replaced and the front of the building left railing was loose it will be replaced or repaired and a new dryer flap replaced</i>	<i>Done</i> <i>Done</i>
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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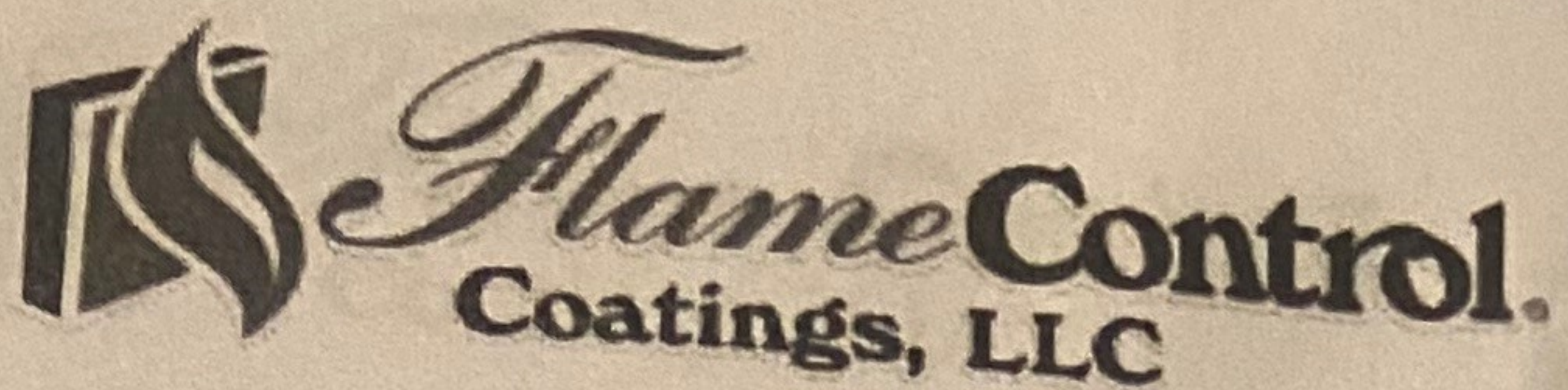
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C 180	Continued From page 11 This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the rules above are not being met and the call buttons are not working as intended. This is not compliant with the rule. Where the 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	<i>And a call system will be put in place for the residents</i>	<i>4/30</i>

05/15/2024

I Ed Pope checked all windows
and they are shutting and opening freely. Side
Sliding door is shutting and opening freely cleaning
and greased track at Confidence Builders II. 1135A
Ahoskie Cofield Rd, Cofield NC 27922. Any
question or concerns please call 252-209-4245

Ed Pope
5/15/24



FLAME CONTROL NO. 133A

A Water Base Varnish

Fire Retardant Polyurethane Varnish
Fire Hazard Classification, Class "B"

DESCRIPTION:

Flame Control No. 133A is a water base, fire retardant polyurethane varnish, with a semi-gloss sheen. It is designated for use on all new or previously coated interior wood surfaces (except floors). The varnish will not leach or turn white on aging or washing.

RECOMMENDED USES:

For application to all interior wood surfaces, where a reduction of surface burning characteristics is required to comply with building code requirements. Recommended for use over water-based stains. For use over oil-based stains, coating should be tested first as oil-based stains are not recommended.

USED BY:

Schools, Colleges, Nursing Homes, Child Care Centers, Hospitals, Penal Institutions, Apartments, Hotels, Factories, Warehouses, Retail Stores, Restaurants, Utilities, Railroad and other Transportation Companies, Oil and Chemical Installations, Military Installations, and other facilities where fire retardant coatings are required.

PERFORMANCE INFORMATION:

- Class "B" fire rated on wood when applied in two coats at 450 sq.ft./gallon per coat. - See Fire Hazard Classification Section.
- Complies with federal, state, local building and fire code requirements.
- Dries by water evaporation to a tough, flexible, semi-gloss finish.
- Does not leach (lose fire retardancy) on exposure to high humidity.
- Meets all current environmental regulations.

- The coating is somewhat thermosplastic.
- Precaution must be taken when two coated surfaces are touching each other, to prevent sticking and blocking.

CHARACTERISTICS:

Finish Clear

Spreading

Rate 450 sq. ft./gal. (11.0 m²/L)
applied in two coats
3.6 mils wet, 0.9 mils dry per coat

Coverage ... 225 sq.ft./gal (5.5 m²/L)

V.O.C. 0.74 lbs./gal. (89 g/L)

Volume Solids 24% ± 2

Weight Solids 28% ± 2

Drying Time @ 77°F & 50% RH: ..

To touch 15-30 min.

To handle 60 min.

To top coat 30 min.

Type of Cure

..... Water Evaporation/Coalescence

Flash Point. None

Reducer/Cleaner Water

Shelf Life. 1 year (unopened)

Packaging 1 & 5 gal. containers
weight/gal. 8.7 lbs.

Shipping weight 4 gals - 40 lbs.
5 gals - 48 lbs.

Application . Brush, foam applicator,
conventional and airless spray

PRECAUTIONS:

Adequate ventilation must be provided during and after application until the coating has dried. Avoid breathing vapors or spray mist. Close container after use. DO NOT TAKE INTERNALLY. Keep from freezing.

**Read MSDS before opening
containers.**

**KEEP OUT OF REACH OF
CHILDREN**

SURFACE PREPARATION:

Surface preparation should be carried out according to good painting practices. All dirt, grease, oil, wax, rust and other foreign matter must be removed. May be applied to previously coated surfaces in good condition. Substrates containing oil-based stains should be tested first. Glossy surfaces must be dulled with sandpaper or steel wool. All sanding, filling of nail holes, etc. must be completed prior to the application of No. 133A.

APPLICATION:

No. 133A can be applied by brush, foam applicator or spray. Stir material well before using, then apply a uniform coat at a coverage rate of 225 sq. ft./U.S. gallon (5.5 m²/L), applied in one coat, or two coats at 450 sq. ft./gal (11.0m²/L). Allow at least 30 minutes drying time between coats. Do not apply when surface or air temperature is below 50°F (10°C).

APPLICATION EQUIPMENT:

Airless Spray

Titan 440 Impact (or Equivalent)

Pump

Fluid Pressure 2000-2400 psi

Manifold Filter 60 Mesh

Gun Filter 60 Mesh

Fluid Hose ¼" diameter

Gun LX-80 II

Tip.010 - .013



SHERWIN-WILLIAMS.

AHOSKIE Store 702514

719 MEMORIAL DR E
AHOSKIE NC 27910 3911
(252)332-3504
Fax (252) 209-0006
www.sherwin-williams.com

CORRECTION

Tran # 6730-8
E14/10753
MATTHEW

4:12pm
09/27/21
31

Original Transaction: 10753 / 66169 09-23-2021

HALL*CAROLYN

Account XXXX-9332-7

Job 1 HALL*CAROLYN

*** Changed from ***

5 DEPOSIT

1.00 @ -114.55 -114.55

Comments: fire retardant 133a #4129060

SUBTOTAL BEFORE TAX -114.55

7.000%:1-342791000 .00

*** Changed to ***

412-9060 133A-1 GALLON

FIRE RET. VARNISH

1.00 @ 243.39 243.39

Discount (\$) -145.44

Comments: Pricing Accommodation

1024-56043 EACH

SUPPLY CHAIN CHRG 4%

No Tax

1.00 @ 9.74 9.74

SUBTOTAL BEFORE TAX 107.69

7.000%:1-342791000 6.86

*** Corrected Totals ***

SUBTOTAL BEFORE TAX -6.86

7.000% SALES TAX:1-342791000 6.86

TOTAL

\$0.00

Customer Signature

Date

S-W Employee Signature

Purchases are subject to Sherwin-Williams
Terms and Conditions of Sale located at
sherwin-williams.com/terms-and-conditions.

Thank You
receipt required for refund

SHERWIN-WILLIAMS
719 MEMORIAL DR E
AHOSKIE NC 27910 3911

visit www.sherwin-williams.com
Store 702514 MATTHEW
(252) 332-3504
Fax - (252) 209-0006



SHERWIN-WILLIAMS.

ACCOUNT: 7846-9332-7 JOB 1 HALL*CAROLYN

HALL*CAROLYN
415 MILL BRANCH CHURCH RD
AULANDER NC 27805 9323

(252) 538-1049

CORRECT
No. 6730-8

DATE: 09/27/21
TIME: 4:12 PM

1-800100
E14/10753 31

SALES NUMBER	SIZE	PRODUCT	DESCRIPTION	QTY	PRICE	VALUE
*****CHANGED FROM*****						
5			DEPOSIT	1	-114.55	-114.55 N
			fire retardant 133a #4129060			
SUBTOTAL BEFORE TAX						-114.55
7.000%:1-342791000						.00
*****CHANGED TO*****						
412-9060	GALLON 133A-1		FIRE RET. VARNISH	1	243.39	243.39
			Discount (\$)			-145.44
			Pricing Accommodation			
1024-56043	EACH		SUPPLY CHAIN CHRG 4%	1	9.74	9.74 N
SUBTOTAL BEFORE TAX						107.69
7.000%:1-342791000						6.86
*****CORRECTED TOTALS*****						
SUBTOTAL BEFORE TAX						-6.86
7.000% SALES TAX:1-342791000						6.86
TOTAL						\$0.00

ORIGINAL ----- Thank You -----
TERM: 10753 receipt required for refund
TRAN: 66169
DATE: 09/23/21

Purchases are subject to Sherwin-Williams
Terms and Conditions of Sale located at
sherwin-williams.com/terms-and-conditions.

Please note, effective through
12-31-2021, a 4% Supply Chain
Surcharge has been added to all
applicable items purchased.

CUSTOMER SIGNATURE

DATE

S-W SIGNATURE

Company Name: CHRISTOPHER WILLIAMS

INVOICE

Name: _____

Street Address: 1700 FARMGATE RD

City, State: KINSTON

ZIP Code: N.C. 28504

Phone: _____

E-mail: _____ 252-624-5003

Invoice # _____

Date: 3-29-24

Client / Customer

Name: CAROLYN HALL

Street Address: 1135 A AHOSKIE COFIELD RD

City, State: N.C.

ZIP Code: 27922

Description

Amount (\$)

CUSTOMER REQUESTED A
ROUTINE SPARY IN & AROUND
HOMES FOR BUGS RODENTS ETC.

Comments or Special Instructions

Payment is due within _____ days.

SUBTOTAL

DISCOUNT

TAX

TOTAL

Thank you for your business!

Photo

Done

Company Name: _____
Name: CHRISTOPHER WILLIAMS
Street Address: 1702 FARM GATE RD
City, State: KINSTON N.C
ZIP Code: 28504
Phone: 252-624-5003
E-mail: _____

INVOICE

PUBLIC OPERATOR
032-5321
Date: 3-9-24

Invoice # _____

Client / Customer
Name: CAROLYN HALL
Street Address: 1135 A ANOSKIE COFIELD RD
City, State: N.C
ZIP Code: 27922

Description	Amount (\$)
TREATED 2 HOMES FOR BED BUGS	
CUSTOMER WANTS TREATMENT EVERY 6 WEEKS	
ALSO WAS TREATED FOR EGGS	

Comments or Special Instructions:

Payment is due within ____ days.

SUBTOTAL	
DISCOUNT	
TAX	
TOTAL	

Thank you for your business!



MONTHLY INSPECTION RECORD		
BY	DATE	BY
CH	4/2/11	CH
CH	10/2/11	CH
CH	17/2/11	CH
CH	24/2/11	CH
CH	3/3/11	CH
CH	10/3/11	CH
CH	17/3/11	CH
CH	24/3/11	CH
CH	31/3/11	CH

City and State Chemical Fixed
Temperature-Sensing Element Data
Year Manufactured _____
Date Installed _____

MONTHLY INSPECTION RECORD

DATE	BY	DATE	BY
8/23	CA	12/24	CA
9/23	CA	3/24	CA
10/23	CA	4/24	CA
11/23	CA	5/10	CA
12/23	CA		
1/24	CA		
2/24	CA		

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