STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL073011	A. BUILDING: **01 - MAIN** B. WING _____	**06/03/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOLDEN YEARS FAMILY CARE HOME	**410 MONTFORD DRIVE ROXBORO, NC 27573**

(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 June 03, 2024 from 09:55 AM to 11:15 AM at the above referenced facility. DHSR records indicate the home was first licensed on September 3, 1986 as a Family Care Home for six (6) ambulatory Residents (Who are 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 1984 "Rules for Family Care Homes minimum and desired standards and regulations", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, the 1978 (Rev 5) 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. Most of the deficiencies listed were discussed with onsite 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 five residents present in the house responded and evacuated at the time the smoke detectors were activated. The Residents did not respond, and none of them evacuated during the drill. This is not compliant with the rule due to the home being licensed for all ambulatory residents. 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 task on their own for the home to maintain its ambulatory status. 2.) At the time of the survey, it was stated during a conversation with the staff that the resident in bedroom #3 is unable to evacuate on his own at	C 105		

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C 105	Continued From page 2 times. This is not compliant with the rule due to the home being licensed for all ambulatory residents. 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. 3.) At the time of the survey it was observed that there was wood paneling being used as a wall covering multiple parts of the facility. 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, and provide documentation to DHSR on what product was used and how it was applied. 4.) At the time of the survey, it was observed that the fire drill logs did not have all the information required. 1. Identity of the person conducting the drill. 2.. Date and time of the drill. 3. Notification method used. 4. Staff Members on duty and participating. 5. Number of occupants evacuated. 6. Special conditions simulated 7. Problems encountered. 8. Weather Conditions when occupants were evacuated 9. Time required to accomplish complete evacuation. Take the necessary steps to ensure the fire drills have the above information.	C 105		
C 110	Construction-Basement, Attic	C 110		

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C 110	Continued From page 3 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 the attic had storage. This is not compliant with the rule. Take the necessary steps to remove all storage from the attic.	C 110		
C 113	Construction-Door Width SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (j) The door width shall be a minimum of two feet and six inches in the kitchen, dining room, living rooms, bedrooms and bathrooms. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the hallway bathroom door was approximately 24 inches wide. This is not compliant with the rule. Take the necessary steps to submit plans to DHSR on how the facility will alter said doorway to meet the rule above. 2.) At the time of the survey, it was observed that the hallway bathroom door was approximately 27 inches wide. This is not compliant with the rule. Take the necessary steps to submit plans to DHSR on how the facility will alter said doorway to meet the rule above.	C 113		
C 128	Bedrooms-Minimum Area SECTION .0300 - THE BUILDING	C 128		

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C 128	Continued From page 4 10A NCAC 13G .0308 BEDROOMS (d) There shall be a minimum area of 100 square feet, excluding vestibule, closet or wardrobe space, in rooms occupied by one person and a minimum area of 80 square feet per bed, excluding vestibule, closet or wardrobe space, in rooms occupied by two persons. This Rule is not met as evidenced by: 1. At the time of the survey, bedroom #3 had modifications done to it, and the closet was removed. The approximate square footage of the bedroom is 104 sqft. Including Wardrobes in the bedroom, the square footage is only approximately 97 square feet. Per rule (h) Bedroom closets or wardrobes shall be large enough to provide each resident with a minimum of 48 cubic feet of clothing storage space (approximately two feet deep by three feet wide by eight feet high) of which at least one-half shall be for hanging clothes with an adjustable height hanging bar. This is not compliant with the rule. Take the necessary steps to submit plans to DHSR on how the facility will alter the bedroom to meet 100 square feet meeting rules of 10A NCAC 13G .0308 BEDROOMS	C 128		
C 135	Bathroom-Hand Grips SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (e) Hand grips shall be installed at all commodes, tubs and showers used by the residents. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the hallway bathroom was missing a grab bar for the toilet. This is not compliant with the rule. Take	C 135		

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C 135	Continued From page 5 he necessary steps to install a grab bar that's in reach to the toilet. 2.) At the time of the survey, it was observed that bedroom #5 attached to the bathroom was missing a grab bar for the toilet. This is not compliant with the rule. Take the necessary steps to install a grab bar that's in reach of the toilet.	C 135		
C 168	Fire Extinguishers 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 extinguisher was 2 months out of date. This is not compliant with the rule. Take the necessary steps to get the fire extinguisher recertified.	C 168		
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	C 174		

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C 174	Continued From page 6 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 locksets on doors #3 and #2 were reversed and could potentially lock the residents in the room. This is not compliant with the rule. Take the necessary steps to switch the lock sets to their proper orientation and or remove and install passage locks that still latch. 2.) At the time of the system, it was observed that bedroom #3 ceiling air vent was loose and coming down from the ceiling. This is not compliant with the rule. Take the necessary steps to secure the air vent as intended. 3.) At the time of the survey, it was observed that the windowpane in bedroom #3 was loose. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 4.) At the time of the survey, it was observed that bedroom #2 vinyl flooring was torn. This could potentially cause a trip/fall hazard. This is not compliant with the rule. Take the necessary steps to repair and or replace. 5.) At the time of the survey, it was observed that the staff bedroom's attached bathroom was missing the exhaust fan cover. This is not compliant with the rule. Take the necessary steps to replace the exhaust fan cover. 6.) At the time of the survey, it was observed that the hallway bathroom had a loose toilet at the base causing a potential for leaks to happen and for residents to be injured when using the	C 174		

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C 174	Continued From page 7 facilities. This is not compliant with the rule. Take the necessary steps to secure the toilets to prevent any leaks or possible injuries. 7.) At the time of the survey, it was observed that the hallway bathroom had multiple damaged tiles. This is not compliant with the rule. Take the necessary steps to repair and or replace tiles as needed. 8.) At the time of the survey, it was observed that the hallway bathroom window had damaged blinds. This could potentially affect the privacy of the residents and our staff. This is not compliant with the rule. Take the necessary steps to repair and or replace the blinds. 9.) At the time of the survey, it was observed that the kitchen had multiple damaged tiles and or missing tiles on the counter. This is not compliant with the rule. Take the necessary steps to repair and or replace 10.) At the time of the survey, it was observed that the kitchen had multiple damaged tiles on the floor. This could potentially lead to a trip/fall hazard. This is not compliant with the rule. Take the necessary steps to repair and or replace tiles as needed. 11.) At the time of the survey, it was observed that the oven exhaust had duct tape on the bottom of the ductwork. This is not compliant with the rule. Take the necessary steps to replace the duct tape with metallic tape. 12..) At the time of the survey, it was observed that the dining room flooring had black tape. This could potentially lead to a trip/fall hazard. This is not compliant with the rule. Take the necessary	C 174		

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C 174	Continued From page 8 steps to repair and or replace the flooring permanently. 13.) At the time of the survey, it was observed that the dining room textured ceiling was flaking. This is not compliant with the rule. Take the necessary steps to repair, patch, and paint the ceiling. 14.) At the time of the survey, it was observed that bedroom #4 ceiling air vent was loose. This is not compliant with the rule. Take the necessary steps to secure the air vent as intended. 15.) At the time of the survey, it was observed that the windows in bedroom #4 were hard to open. This could potentially impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair and or replace the windows as needed. 16.) At the time of the survey, it was observed that the bedroom #4 door that leads into the living room is not properly closing and leaving a gap. This could potentially impact the privacy of the resident in bedroom #4. This is not compliant with the rule. Take the necessary steps to repair the door. 17.) At the time of the survey, it was observed that the bedroom #5 door handle was loose. This is not compliant with the rule. Take the necessary steps to secure the doorknob. 18.) At the time of the survey, it was observed that the door leading to the exterior of bedroom #5 blinds was damaged. This is not compliant with the rule. Take the necessary steps to repair the blinds.	C 174		

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C 174	Continued From page 9 19.) At the time of the survey, it was observed that the "Mechanical Air Conditioner" secured into the wall in bedroom #5 has walling directly underneath it that is starting to rot. This is not compliant with the rule. Take the necessary steps to repair and or replace the affected area and find the root cause of said issue. 20.) At the time of the survey, it was observed that bedroom #5 attached to the bathroom had a loose toilet at the base causing a potential for leaks to happen and for residents to be injured when using the facilities. This is not compliant with the rule. Take the necessary steps to secure the toilets to prevent any leaks or possible injuries. 21.) At the time of the survey, it was observed that the mechanical ventilation in bedroom #5 attached bathroom is binding. This could potentially cause a fire. This is not compliant with the rule. Take the necessary steps to repair and or replace the mechanical ventilation. 22.) At the time of the survey, it was observed that the grab bar for bedroom #5 attached bathroom is coming out of the wall on the bottom. This could potentially lead to a trip/fall hazard. This is not compliant with the rule. Take the necessary steps to repair the grab bar. 23.) At the time of the survey, it was observed that bedroom #5 closet had cobwebs throughout the ceiling. This is not compliant with the rule. Take the necessary steps to remove the cobwebs 24.) At the time of the survey, it was observed in the attic that multiple ceiling penetrations with water were water-damaged and exposed light coming through the decking. This is not compliant	C 174		

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C 174	Continued From page 10 with the rule. Take the necessary steps to repair/replace these areas in the attic. 25.) At the time of the survey, it was observed that the bathroom exhaust for the staff bedroom is missing the ductwork in the attic. This is not compliant with the rule. Take the necessary steps to replace and or install said ductwork. 26.) At the time of the survey, it was observed that the kitchen oven exhaust duct work has duct tape in the attic. This is not compliant with the rule. Take the necessary steps to utilize metallic tape on all duct work repairs and or installations. 27.) At the time of the survey, it was observed that the dining room door leading to the exterior of the facility was loose. This is not compliant with the rule. Take the necessary steps to secure said doorknob.	C 174		
C 175	Heating Sys.-No Unvented or Portable Elec. SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (b) There shall be a central heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. Built-in electric heaters, if used, shall be installed or protected so as to avoid hazards to residents and room furnishings. Unvented fuel burning room heaters and portable electric heaters are prohibited. (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 175		

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C 175	Continued From page 11 an electric heater was in the laundry room. This is not compliant with the rule. Take the necessary steps to remove the electric heater from the facility.	C 175		
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. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the old call system no longer works as intended and replaced with a wireless call system that does not meet the rule. This is not compliant with the rule. Take the necessary steps to program the wireless system to stay on till switched off from the device that initiated the activation of the call system. -If the old call system is no longer in use take the necessary steps to remove components from the facility.	C 180		
C 183	Outside Premises-Clean, Safe SECTION .0300 - THE BUILDING	C 183		

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C 183	Continued From page 12 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 the laundry room had an extension cord leading to a camera. This is not compliant with the rule. Take the necessary steps to remove the extension cord from the facility, and if dedicated power is needed install an additional power supply from a qualified professional. 2.) At the time of the survey, it was observed that the exterior rear porch light fixture was missing a globe. This is not compliant with the rule. Take the necessary steps to replace the globe. 3.) At the time of the survey, it was observed that the rear porch had an exhaust screen that was damaged and a bug nest inside of it. This is not compliant with the rule. Take the necessary steps to remove the nest, install a new screen, and or repair the existing one. 4.) 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 5.) At the time of the survey, it was observed that the gutters in the facility were starting to fall in multiple spots around the facility as well as downspouts not properly secured. This is not compliant with the rule. Take the necessary steps to secure gutters back to the facility and properly secure all downspouts around the facility.	C 183		

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GOLDEN YEARS FAMILY CARE HOME	**410 MONTFORD DRIVE ROXBORO, NC 27573**

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C 183	Continued From page 13 6.) At the time of the survey, it was observed that the flashing, soffit, and gabbles were in a state of disrepair. This is not compliant with the rule. Take the necessary steps to repair, and or replace components as needed as well as prep, and paint said areas after work is completed. 7.) 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. 8.) At the time of the survey, it was observed that the staff bedroom window on the left side of the facility was showing signs of rot. This is not compliant with the rule. Take the necessary steps to repair and or replace. 9.) At the time of the survey, it was observed on the rear left side of the facility that a row of shingles against the vinyl siding was showing signs of disrepair. This is not compliant with the rule. Take the necessary steps to repair and or replace. 10.) At the time of the survey, it was observed that the front left side of the yard had two washouts that could potentially become trip/fall hazards and or harbingers for pests. This is not compliant with the rule. Take the necessary steps to find out if the areas are intentionally for drainage and if so, install proper coverings to prevent residents and or staff from accessing and or filling if not needed and monitor. 11.) At the time of the survey, it was observed that the front porch had a camera that was powered by an extension cord. This is not compliant with the rule. Take the necessary steps	C 183		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL073011	A. BUILDING: **01 - MAIN** B. WING _____	**06/03/2024**

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C 183	Continued From page 14	C 183		

to remove the extension cord from the facility and if dedicated power is needed install an additional outlet from a qualified professional.

12.) At the time of the survey, it was observed that the front porch light fixture was missing a globe. This is not compliant with the rule. Take the necessary steps to replace the globe on the light fixture.

13.) At the time of the survey, it was observed that the front porch window for the living room was showing signs of rot. This is not compliant with the rule. Take the necessary steps to repair and or replace.

14.) At the time of the survey, it was observed that the front porch railing on the right side was loose. This could potentially cause a trip/fall hazard. This is not compliant with the rule. Take the necessary steps to repair and or replace the railing.

15.) At the time of the survey, it was observed that on the right side of the facility, the exterior wall of bedroom #5 wall is starting to separate from the facility. This is not compliant with the rule. Take the necessary steps to secure it back and find the root cause.

16.) At the time of the survey, it was observed that the front yard had a tree with an extension cord in it that was not powered. This is not compliant with the rule. Take the necessary steps to remove the extension cord from the facility.

17.) At the time of the survey, it was observed that the electrical power supply for the HVAC system had a broken conduit leading up to the attic. This is not compliant with the rule. Take the

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C 183	Continued From page 15 necessary steps to repair and or replace.	C 183		