

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL008032	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/26/2023
NAME OF PROVIDER OR SUPPLIER CHERRY'S FAMILY CARE HOME #3		STREET ADDRESS, CITY, STATE, ZIP CODE 106 HARMON STREET AULANDER, NC 27805		
(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 Kelly Myers DHSR Construction Section conducted a Biennial Survey on September 26, 2023 from 1:40 PM to 2:44 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 03, 1994 as a Family Care Home for six (6) 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 1992 Rules T10 42C for Family Care Homes and the applicable portions of the 2005 "Rules 10A NCAC 13G for the Licensing of Family Care Homes", and, the applicable portions of the 1991 North Carolina State Building Code Volume I with 94 revisions - Section 514.1 Exception #1 - 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 onsite staff during the exit interview. 2.) Take action 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 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION	C 117		

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

TITLE

(X6) DATE

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C 117	Continued From page 1 (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the most recent fire inspection report was not on site and available for review. This is not compliant with the rule. Take the necessary steps to have a fire inspection completed and have a copy on site for review. Email the up to date fire inspection report to DHHS.	C 117		
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 there are two storm doors with locking mechanisms that require more than one single hand motion to unlock and open the door in the event of an emergency. This is not compliant with the rule. Take the necessary steps to disengage the locking mechanism or replace.	C 147		
C 152	Floors 10A NCAC 13G .0314 FLOORS (a) All floors in a family care home shall be of	C 152		

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C 152	Continued From page 2 smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs shall not be used. (c) All floors shall be kept in good repair. This Rule is not met as evidenced by: 1. At the time of the survey, it was observed that there are several locations where the floor covering was missing (front entry door, kitchen to hallway entry, staff bedroom). This is not compliant with the rule. Take necessary steps to repair or replace the flooring to prevent trip hazards and protect the underlayment. 2. At the time of the survey, it was observed that the flooring in the foyer gives when walked on. This may be due to the underlayment not being fastened property or an issue with the framing. This is not compliant with the rule. Take the necessary steps to further evaluate the cause of the flooring giving and repair. 3. At the time of the survey, it was observed that the outdoor carpet located at the front porch is coming apart at the seam and is a trip hazard. This is not compliant with the rule. Take the necessary steps to repair or remove the adhered carpet to eliminate the potential trip hazard. * This deficiency was previously cited during our January 28,2020, and March 29, 2022, biennials surveys, take action to correct these deficiencies.	C 152		
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	C 169		

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C 169	Continued From page 3 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 there are three ceiling fans where the end of the paddle blades is within 36 inches of a smoke detector (foyer, sitting area and kitchen). This is not compliant with the rule. Take the necessary steps to remove or replace ceiling fans with shorter paddle blades to allow for a 36-inch distance from the smoke detector.	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 there is lint buildup at the exterior clothes dryer vent. This is not compliant with the rule. Take the necessary steps to clean the clothes dryer vent to allow for proper air flow and minimize the	C 174		

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C 174	Continued From page 4 potential risk of a fire. * This deficiency was previously cited during our January 28,2020, and March 29, 2022, biennials surveys, take action to correct these deficiencies. 2. At the time of the survey it was observed that the vinyl siding was dirty. This is not compliant with the rule. Take the necessary steps to power wash the house routinely. * This deficiency was previously cited during our January 28,2020, and March 29, 2022, biennials surveys, take action to correct these deficiencies. 4. At the time of the survey it was observed that the back left corner area of the house had loose vinyl siding. This is not compliant with the rule. Take the necessary steps to secure the siding. * This deficiency was previously cited during our January 28,2020, and March 29, 2022, biennials surveys, take action to correct these deficiencies. 5. At the time of the survey it was observed that that there was loose vinyl siding on the right-hand side of the house. This is not compliant with the rule. Take the necessary steps to secure the siding. 6. At the time of the survey it was observed that the handrail at the inner side of the side door ramp was not in place. This is not compliant with the rule. Take the necessary steps to install a handrail to the inner side of the ramp. * This deficiency was previously cited during our March 29, 2022, biennials survey, take action to correct this deficiency. 7. At the time of the survey it was observed that	C 174		

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C 174	Continued From page 5 the window in the second bedroom (left from the front door) window does not stay in place when raised and is loose in the track. This is a safety hazard that may hinder egress in the event of a fire and cause harm to someone unsuspecting that the window will not stay in place. This is not compliant with the rule. Take the necessary steps to repair or replace the window so that it stays in place when lifted. 8. At the time of the survey it was observed that there was an end of a used incense stick being held by the doorbell cover in the hallway. This is not compliant with the rule. Take the necessary steps to not have open flames or burning incense within the home. 9. At the time of this survey, it was observed that there was a space heater located in the sitting room area by the right hallway entrance. Space heaters are a potential fire hazard and are not permitted. This is not compliant with the rule. Take the necessary steps to remove the space heater. 10. At the time of the survey it was observed that there is ceiling damage in the front right corner of the staff bedroom. This is not compliant with the rule. Take the necessary steps to repair the damage and the peeling paint. 11. At the time of the survey, it was observed that the water temperature for the bathroom faucets, did not fall into the allowable range of 100-116 degrees Fahrenheit. Both bathroom vanity faucet temperatures were at 95 degrees Fahrenheit. This is not compliant with the rule. Take the necessary steps/actions to ensure that the water temperature is maintained between 100 to 116 degrees Fahrenheit. Once corrections have been made, provide written verification to	C 174		

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C 174	Continued From page 6 our office. 12. At the time of the survey it was observed that the facility was not conducting fire drills on the first or third shift and it took 30 minutes for clients to evacuate. This is not compliant with the rule. Take the necessary steps to ensure fire drills are conducted during all shifts (1st, 2nd, and 3rd) and should not take more than 8 minutes for all residents and staff to evacuate from the building. 13. At the time of the survey it was observed that none of the clients present responded and evacuated when 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 educate and train the client to respond and evacuate, without staff prompting or assistance, at any time the smoke detectors are activated. The clients must perform this task on their own for the home to maintain its ambulatory status. 14. At the time of the survey it was observed that the return filter is dirty and partially covered by the dryer. This is not compliant of the rule. Take the necessary steps to replace the filter on a routine schedule and keep the floor grill clear from blocking air flow. 15. At the time of the survey it was observed that the laundry room door binds when closed and does not latch. This is not compliant with the rule. Take the necessary steps to repair or replace the door so that it closes freely and latches. 16. At the time of the survey it was observed that the laundry room door is forcefully pulled shut when the HVAC system turns on. This is an indication that the system is not receiving the proper air flow which may shorten the life of the	C 174		

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C 174	Continued From page 7 system. This is not compliant with the rule. Take the necessary steps to allow proper air flow to the return grill located in the laundry room. 17. At the time of the survey it was observed that the electrical panel located in the front right bedroom is missing two screws to secure the cover to the wall. This is not compliant with the rule. Take the necessary steps to secure the cover with the appropriate screws designed for electrical panels. 18. At the time of the survey, it was observed that the door to the staff bedroom does not open freely due to the floor. This is a potential hazard that could inhibit someone from quickly leaving the room in the event of an emergency. This is not compliant with the rule. Take the necessary steps to repair or replace the door so it opens and closes without resistance. 19. At the time of the survey it was observed that there is vegetation growing out from behind the siding at the front right corner of the home. This has the potential to damage the structure. This is not compliant with the rule. Take the necessary steps to cut back and maintain the vegetation. 20. At the time of the survey it was observed that the back left shutter is broken and missing a fastener. This is not compliant with the rule. Take the necessary steps to repair or replace the shutter. 21. At the time of the survey it was observed that the storage building located in the back right corner has a broken window that is a potential hazard. This is not compliant with the rule. Take the necessary steps to remove the hazard of the broken window. 22. At the time of the survey it was observed that the left 1x12 band has deterioration located at the front left side of the front porch. This is not compliant with the rule. Take the necessary steps to repair or replace to protect the main framing	C 174		

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C 174	Continued From page 8 structure of the porch. 23. At the time of the survey it was observed that there is a severely rotting ramp deck board at the front right side of the porch ramp. This is not compliant with the rule. Take the necessary steps to replace the deck board. 24. At the time of the survey it was observed that the metal wrap was missing on the right side of the porch at the ceiling. There is exposed wood which may deteriorate if not protected. This is not compliant with the rule. Take the necessary steps to repair or replace to prevent potential damage to the structure. 25. At the time of the survey it was observed that there is a deteriorating deck board at the left side entrance porch. This is not compliant with the rule. Take the necessary steps to repair or replace the board. 26. At the time of the survey it was observed that there was a nail sticking up out of the handrail of the right front ramp. This is not compliant with the rule. Take the necessary steps to remove the nail that is a potential hazard. 27. At the time of the survey it was observed that there are building materials and debris around the storage shed located at the back right corner. This is not compliant with the rule. Take the necessary steps to remove the debris. 28. At the time of the survey it was observed that the ventless charcoal range hood filter is dirty. This is not compliant with the rule. Take the necessary steps to replace the charcoal filter to prevent pests and odor. 29. At the time of the survey it was observed that the electrical wire to the water heater was not secured with the proper connector. This is not compliant with the rule. Take the necessary steps to secure the wire with a wire connector to prevent the wearing of the electrical wire which could cause electrical shock.	C 174		

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C 174	Continued From page 9 * This deficiency was previously cited during our March 29, 2022, biennials survey, take action to correct this deficiency. 30. At the time of the survey it was observed that there was a buildup of lint and debris behind the clothes dryer. This is not compliant with the rule. Take the necessary steps to correct this deficiency and routinely clean behind the dry to prevent the possibility of a fire. * This deficiency was previously cited during our January 28, 2020, and March 29, 2022, biennials surveys, take action to correct these deficiencies. 31. At the time of the survey it was observed that the heat detector in the center attic area was hanging down from the mounting plate. This is not compliant with the rule. Take the necessary steps to secure the heat detector and provide a photo to DHHS showing the correction has been made. * This deficiency was previously cited during our January 28, 2020, and March 29, 2022, biennials surveys, take action to correct these deficiencies.	C 174		
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	C 180		

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C 180	Continued From page 10 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 there is not a call assist system installed for clients to contact staff in the event of an emergency. This is not compliant with the rule. Take the necessary steps to have a call assist system installed that will identify each bed(client) when activated.	C 180		