STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL079109	A. BUILDING: **01** B. WING _____	**09/17/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WHISPERING PINES ASSISTED LIVING	**149 HIGHWAY 87** **REIDSVILLE, NC 27320**

(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 September 17, 2024 from 12:55 PM to 01:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on August 14, 2017 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 we are requiring the home to be in compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes the applicable portions of the 2012 North Carolina State 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 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 requirements of the North Carolina State Building	C 105		

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C 105	Continued From page 1 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 3rd shift fire drills are not taking place. This is not compliant with the rule. Take the necessary steps to ensure 1st 2nd and 3rd shift fire drills are taking place.	C 105		
C 109	Construction-Two Stories SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (f) If the building is two stories in height, it shall meet the following requirements: (1) Each floor shall be less than 2500 square feet in area if existing construction or, if new construction, shall not exceed the allowable area for R-4 occupancy in the North Carolina State Building Code; (2) Aged or disabled persons are not to be	C 109		

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C 109	Continued From page 2 housed on any floor above or below grade level; (3) Required resident facilities are not to be located on any floor above or below grade level; and (4) A complete fire alarm system with pull stations on each floor and sounding devices which are audible throughout the building shall be provided. The fire alarm system shall be able to transmit an automatic signal to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection. This Rule is not met as evidenced by: 1.) At the time of the survey, it was noted that the 2nd floor was being used for storage. This was identified in 2020, but no action was taken to address the issue. Since the problem persists, the Department of Health Service Regulation (DHSR) requires the facility to submit plans to rectify the deficiency permanently. DHSR considers this space habitable in its current state. The necessary actions include removing all storage and flooring, de-energizing electrical components, properly covering and reinstalling the heat detector in the common area of the large room, and replacing the attic door with drywall that has an access door for repairs. Or add a second egress to meet the Means of Egress requirements of 428.2.1 and licensure rule 10A NCAC 13G .0312 (a) . Additionally, a complete fire alarm system with pull stations on each floor and audible sounding devices throughout the building must be installed. The fire alarm system should be capable of automatically transmitting a signal to the local emergency fire department dispatch center, either directly or through a central station monitoring company connection.	C 109		

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C 146	Continued From page 3	C 146		
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 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 facility had residents who needed additional assistance to evacuate, but the facility had only one ramp. This is not compliant with the rule. Take the necessary steps to submit plans to DHSR, reach out to your local building officials to verify if a permit is needed, and provide documentation to DHSR prior to installing a 2nd ramp that meets the current building code and the rules. 2.) At the time of the survey it was observed that there were non-ambulatory clients in the facility that required prompting and assistance to evacuate the house during an emergency. Per our records there has been no change of ambulatory status request for the license. Take the necessary steps to relocate the non-ambulatory clients or submit a change of ambulatory status request to our licensure	C 146		

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C 146	Continued From page 4 section.	C 146		
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 kitchen light was not working. This is not compliant with the rule. Take the necessary steps to repair and or replace the kitchen light 2.) At the time of the survey, it was observed that the kitchen had an open junction box on the wall. This could potentially cause electrical shock. This is not compliant with the rule. Take the necessary steps to install a cover plate on the junction box. 3.) At the time of the survey, it was observed that the hall bath had a loose grab bar. This is not compliant with the rule. Take the necessary steps to properly secure the grab bar. 4.) At the time of the survey, it was observed that the 2 light fixtures on the exterior of the facility's front doors are missing bulbs. This is not compliant with the rule. Take the necessary steps to ensure all light fixtures have bulbs in sockets.	C 174		