

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL079089	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 07/29/2024
NAME OF PROVIDER OR SUPPLIER SAFE HAVEN # 2		STREET ADDRESS, CITY, STATE, ZIP CODE 157 GLENDALE DRIVE EDEN, NC 27288		
(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 David Hickman DHSR Construction Section conducted a Biennial Follow-up Survey on August 09, 2023 from 11:25 AM to 11:55 AM at the above referenced facility. At the time of the survey not all deficiencies were corrected therefore further action is required. Additional deficiencies were also observed. 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. There were previous deficiencies that were not closed out from an open biennial survey, these deficiencies were brought forward from previous survey. 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 116}	Construction-Meet Sanitary Requirements SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (m) The building shall meet sanitation requirements as determined by the North Carolina Department of Environment and Natural Resources; Division of Environmental Health. This Rule is not met as evidenced by: 1.) Per Environmental Health the home is currently marked as Provisional (More than 20	{C 116}		

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

TITLE

(X6) DATE

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{C 116}	Continued From page 1 Demerits, but less than 40 Demerits or 6-point demerit) they found concern with Liquid waste discharge and cited 6 demerits; Take actions to address all of the listed conditions in the 1/28/2021 sanitation report and schedule a follow-up inspection from Rockingham County Environmental Health and provide to our office a copy of the approved sanitation report and we will schedule a follow-up survey to verify compliance. *At the time of the follow up survey a updated sanitation report was not on site for review. Take the proper steps to provide a updated sanitation report.	{C 116}		
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 the door hardware for the front door was not a single motion unlocking device. This is not compliant with the rule. Take the necessary steps to install the proper single motion unlocking door hardware.	C 147		
{C 149}	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS	{C 149}		

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{C 149}	Continued From page 2 (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that there is no handrail on the inside of the ramp on the left hand side of the facility. This is not compliant with the rule. Take the necessary steps to add a handrail. *At the time of the survey this deficiency had not been corrected. New deficiencies cited: 2.) 1.) At the time of the survey it was observed that there is no handrail on the inside of the rear steps. This is not compliant with the rule. Take the necessary steps to add a handrail. 3.) At the time of the survey it was observed that the transition from the ramp to the landing was not smooth and was causing a trip hazard. This is not compliant with the rule. Take the necessary steps to create a smooth transition. 4. At the time of the survey it was observed that the rails for the ramp did not extend to the end of the ramp. This is not compliant with the rule. Take the necessary steps to extend the rails to the end of the ramp.	{C 149}		
{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 3 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 the toilets in both bathrooms were loose at their bases. This is not compliant with the rule. Take the proper steps to secure the toilet. * This deficiency has not been corrected. 2. At the time of the survey it was observed that the bedroom door in the last bedroom on the left will not latch. This is not compliant with the rule. * This deficiency has not been corrected. Take the proper steps to replace/repair the latch on the bedroom door. 3. At the time of the survey it was observed that there is a build up of lint behind the dryer. This is not compliant with the rule. *This deficiency has not been corrected. Take the proper steps to clean out behind the dryer on a regular basis. 4. At the time of the survey it was observed that the pull station in the hallway was not working. This is not compliant with the rule. Take the proper steps to replace and or repair the pull station to working order. The Pull Station can also be removed with all equipment as it is not required by the rules. *This deficiency has not been corrected. New deficiencies cited: 5. At the time of the survey it was observed that the floor covering in the living room was torn in multiple places causing a possible trip hazard. This is not compliant with the rule. Take the	{C 174}		

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{C 174}	Continued From page 4 necessary steps to repair the floor. 6. At the time of the survey it was observed that the dryer exhaust vent was clogged with lint. This is not compliant with the rule. Take the necessary steps to clean out the vent. 7. At the time of the survey it was observed that the gutter was loose at the rear of the house. This is not compliant with the rule. Take the necessary steps to repair the gutter. 8. At the time of the survey it was observed that there was a build up of cobwebs and dirt on the exterior soffit and windows. This is not compliant with the rule. Take the necessary steps to power wash the house. .	{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 5 there were three space heaters stored in the laundry room. This is not compliant with the rule. Take the necessary steps to remove the space heaters from the house.	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 call system was not active. The call system was capped off in the bedrooms and not working as intended. This is not compliant with the rule. Take the proper steps to install a working call system on site. *This deficiency has not been corrected	{C 180}		