STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL079116	A. BUILDING: **01** B. WING _____	**11/06/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HARRISONS CARING HANDS 2	**538 WARRINER STREET 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 David Hickman DHSR Construction Section conducted a Biennial Survey on November 6, 2024 from 11:00 AM to 11:45 AM at the above referenced facility. DHSR records indicate the home was first licensed on March 30, 2006 as a Family Care Home for six ambulatory Residents (able to evacuate and respond 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 2005 Rules 10A NCAC 13G for Family Care Homes and the 2002 North Carolina State Building Code - Section 421.2 - 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 Code. All new construction, additions and	C 105		

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C 105	Continued From page 1 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, there were six residents inside the house when the smoke detectors were activated for a fire drill. Two of the residents required prompting to respond and evacuate when the alarms were activated. This is not compliant with the rule. Based on the house being licensed for all ambulatory residents, all of the residents need to be able to respond and evacuate without staff prompting or assistance. Take the necessary steps to train all residents to respond and evacuate at anytime the alarms are activated. 2. At the time of the survey, it was observed that multiple smoke detectors are past the 10-year lifespan. Per NFPA 72 10.4.7 states "that "Smoke Alarms" installed in one and two-family dwellings "shall not remain in service for more than ten years from the date of manufacture". This is not compliant with the rule. Take the necessary steps to replace all smoke detectors in the facility that	C 105		

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C 105	Continued From page 2 are past the 10-year lifespan and monitor the rest.	C 105		
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 storm door lock was not a single motion unlocking device. This is not compliant with the rule. Take the necessary steps to disable the storm door lock.	C 147		
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (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 the small ramp at the front door did not have a grab bar at the front door. This is not compliant with the rule. Take the necessary steps to install a grab bar next to the front door. 2. At the time of the survey, it was observed that there was no handrail on the house side of the	C 149		

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C 149	Continued From page 3 front ramp. This is not compliant with the rule. Take the necessary steps to install a handrail in this location.	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 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 light in the front foyer was hanging below 6 feet 8 inches and causing a hazard of someone hitting their head. This is not compliant with the rule. Take the necessary steps to raise the light so there is a minimum of 6 feet 8 inches of clearance from the floor. 2. At the time of the survey, it was observed that the smoke detector in the staff bedroom had been removed. This is not compliant with the rule. Take the necessary steps to replace the smoke detector. 3. At the time of the survey, it was observed that one of the smoke detectors in the house was chirping, indicating a low battery. This is not compliant with the rule. Take the necessary steps to replace the batteries as needed. 4. At the time of the survey, it was observed that the toilet in the right side bathroom was loose at	C 174		

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C 174	Continued From page 4 its base, causing a possible fall hazard or leak. This is not compliant with the rule. Take the necessary steps to secure the toilet. 5. At the time of the survey, it was observed that the fire extinguishers monthly monitoring was not up to date. This is not compliant with the rule. Take the necessary steps to update the tags and continue to monitor the extinguishers. 6. At the time of the survey, it was observed that there were multiple deficiencies in bedroom 4 including the following; a) There was a hole in the wall behind the door. b) The door jamb was damaged. c) The door would not latch properly. This is not compliant with the rule. Take the necessary steps to correct these deficiencies. 7. At the time of the survey, it was observed that there was peeling paint on the ceiling near the exhaust fan in bathroom 2. This is not compliant with the rule. Take the necessary steps to repair the ceiling. 8. At the time of the survey, it was observed that the door for bedroom 2 would not latch securely, which does not provide the proper privacy for the residents. This is not compliant with the rule. Take the necessary steps to repair the door so it latches securely. (This door cannot have a lock due to the egress path leading through the room.) 9. At the time of the survey, it was observed that the waterproof cover for the exterior GFCI receptacle next to the front door was missing. This is not compliant with the rule. Take the necessary steps to replace the cover.	C 174		

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C 174	Continued From page 5 10. At the time of the survey, it was observed that the guardrails and handrails for the rear steps were loose and deteriorating. This is not compliant with the rule. Take the necessary steps to secure the rails and replace the deteriorating wood.	C 174		