| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | FCL017038 | A. BUILDING: **01**<br>B. WING _____ | R<br>**02/06/2025** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **BEVERLY RUCKER FAMILY CARE HOME # 9** | **6912 NC HWY 150**<br>**REIDSVILLE, NC 27320** |

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| {C 000} | Initial Comments<br><br>Report by Jonathan Gamsey<br><br>DHSR Construction Section conducted a Biennial Follow-up Survey on February 06, 2025 from 11:20 AM to 11:35 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.<br><br>NOTES:<br>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 the previous survey.<br><br>2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.<br><br>The cited deficiencies are as follows: | {C 000} | | |
| {C 117} | Have Current San. And Fire Safety Approvals<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0302 DESIGN AND CONSTRUCTION<br>(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.<br><br>This Rule is not met as evidenced by:<br>1.) At the time of the survey it was observed that the most recent fire, sanitation reports were not | {C 117} | | |

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| {C 117} | Continued From page 1<br>on site and available for review. This is not compliant with the rule. Take the necessary steps to provide the reports for review. Copies of said reports are to be kept on-site for periodic review by both Licensure and DHSR construction sections.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 117} | | |
| {C 120} | Location-Safe, Accessible<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0303 LOCATION<br>(c) The site of the home shall:<br>(1) be accessible by streets, roads and highways and be maintained for motor vehicles and emergency vehicle access;<br>(2) be accessible to fire fighting and other emergency services;<br>(3) have a water supply, sewage disposal system, garbage disposal system and trash disposal system approved by the local health department having jurisdiction;<br>(4) meet all local ordinances; and<br>(5) be free from exposure to pollutants known to the applicant or licensee.<br><br>This Rule is not met as evidenced by:<br>1.) At the time of the survey, it was observed that the facility road was not being maintained for motor vehicles and emergency vehicle access. This is not compliant with the rule. Take the necessary steps to bring the road back to working condition for vehicles and emergency vehicles. Reach out to the local fire official for verification and send documentation to DHSR.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been | {C 120} | | |

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| {C 120} | Continued From page 2<br>taken to address the deficiency. | {C 120} | | |
| {C 146} | Outside Entrances/Exits-Ramp(s)<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS<br>(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.<br><br>This Rule is not met as evidenced by:<br>1.) At the time of the survey, it was observed that the rear ramp on the facility has a drop off at the bottom of the ramp. This is not compliant with the rule. Take the necessary steps to build the grade up for an even transition.<br>This deficiency was previously cited during our 2019 biennial survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2021 biennial follow-up survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2022 biennial survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 146} | | |

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| {C 146} | Continued From page 3<br><br>2.) At the time of the survey, it was observed that the front ramp is too steep. This is not compliant with the rule. Take the necessary steps to adjust the ramp to meet the rule above for every one-inch rise for each 12 inches of length of the ramp.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 146} | | |
| {C 174} | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT<br>(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.<br>(j) This Rule shall apply to new and existing family care homes.<br><br>This Rule is not met as evidenced by:<br>1.) At the time of the survey it was observed that the monthly checks on the fire extinguishers were not up to date/fire extinguishers were expired. This is not compliant with the rule. Take the necessary steps to monitor fire extinguishers monthly<br>This deficiency was previously cited during our 2019 biennial survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2021 biennial follow-up survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2022 biennial survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our | {C 174} | | |

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| {C 174} | Continued From page 4<br>2024 biennial survey and action hasn't been taken to address the deficiency.<br><br>2.) At the time of the survey it was observed that the exhaust duct for the dryers was a soft duct in the crawl space. This is not compliant with the rule. Take the necessary steps to change the ductwork in the crawl space to hard duct<br>This deficiency was previously cited during our 2019 biennial survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2021 biennial follow-up survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2022 biennial survey and action hasn't been taken to address the deficiency.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency.<br><br>4.) At the time of the survey, it was observed that all bedroom doors were not latching as intended. This could potentially affect the privacy of residents. This is not compliant with the rule. Take the necessary steps to repair the doors to ensure they latch as intended.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency.<br><br>6.) At the time of the survey, it was observed that the water heater was discharging into the crawl space. This is not compliant with the rule. Take the necessary steps to pipe the water heater to the exterior of the facility.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 174} | | |

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| {C 174} | Continued From page 5<br><br>7.) At the time of the survey, it was observed that the bedroom on the left side of the facility had a window that would not open. This could impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair and or replace the window.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency.<br><br>8.) At the time of the survey, it was observed that the facility had pull-down stations, but the surveyor could not verify that the system had an alarm panel. Take the necessary steps to provide documentation on where the alarm system alarm panel is.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency.<br><br>10.) 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<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency.<br><br>11.) At the time of the survey, it was observed that the dryer discharge was missing its exterior dryer flaps and was clogged. This is not compliant with the rule. Take the necessary steps to remove debris and install a dryer exhaust cover.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 174} | | |

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| {C 174} | Continued From page 6<br><br>12.) At the time of the survey, it was observed that the rear deck railing was loose. This is not compliant with the rule. Take the necessary steps to repair and or replace the railing.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 174} | | |
| {C 175} | Heating Sys.-No Unvented or Portable Elec.<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT<br>(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.<br>(j) This Rule shall apply to new and existing family care homes.<br><br>This Rule is not met as evidenced by:<br>1.) At the time of the survey, it was observed that the facility had an unvented fuel burning room heater. This is not compliant with the rule. Take the necessary steps to properly vent and or remove from the facility.<br>This deficiency was previously cited during our 2024 biennial survey and action hasn't been taken to address the deficiency. | {C 175} | | |