STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL058013	A. BUILDING: **01** B. WING _____	**04/08/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PRICE FAMILY CARE HOME	**1385 BROWN ROAD JAMESVILLE, NC 27846**

(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 April 8, 2025 from 1:55 PM to 3:20 PM at the above referenced facility. DHSR records indicate the home was first licensed on December 28, 1967 as a Family Care Home for five Residents; Licensure rules at this time only allowed for a maximum capacity of five Residents. Effective on February 1, 1983 the building code was amended to allow for a maximum of six Residents, and effective on April 1, 1984 Licensure Rules were revised to allow for a maximum capacity of six residents as well. Your home is currently licensed with a capacity of Six (6) all-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 1984 "Rules for Family Care Homes Minimum and Desired Standards and Regulations", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, and the 1978 (Revision 5) North Carolina State Building Code - Section-409.1(g)-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 actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.	C 000		

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C 000	Continued From page 1 The cited deficiencies are as follows:	C 000		
C 172	Fire Safety-Four Rehearsals SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the fire drills were being conducted but none have been conducted on what would be considered a third shift or while the residents are sleeping. This is not compliant with the rule. Take the necessary steps to conduct fire drills on all three shifts so that residents are trained to respond to the smoke detectors sounding any time of the day or night. Residents should be able to evacuate the building within 8 minutes or less. NOTE: The rule requires a fire drill to be conducted on each shift per quarter.	C 172		
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 2 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 receptacle to the left of the kitchen sink was not GFCI protected. This is not compliant with the rule. Take the necessary steps to repair or replace the receptacle. 2. At the time of the survey it was observed that there were multiple burnt bulbs. This is not compliant with the rule. Take the necessary steps to routinely replace all burnt bulbs. 3. At the time of the survey it was observed that the cable box cover was laying on the ground. This is not compliant with the rule. Take the necessary steps to attach and secure the cable box cover. 4. At the time of the survey it was observed that there was debris on the roof at the valley above the front porch. This is not compliant with the rule. Take the necessary steps to routinely clean the debris off the roof. 5. At the time of the survey it was observed that an extension cord was being used at the carport for a florescent light fixture. This is not compliant with the rule. Take the necessary steps to remove the extension cord and use a surge protector or hardwire a receptacle for the light fixture. 6. At the time of the survey it was observed that there was water damage at the soffit overhang at the front porch. This is not compliant with the rule. Take the necessary steps to further evaluate the cause for the water staining and repair as	C 174		

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C 174	Continued From page 3 needed. 7. At the time of the survey it was observed that the front porch railing had some deterioration. This is not compliant with the rule. Take the necessary steps to repair all deteriorating wood. 8. At the time of the survey it was observed there was a broken brick aand mortar at the front entrance steps. This is not compliant with the rule. Take the necessary steps to repair the front entrance steps. 9. At the time of the survey it was observed that the downspout elbow which diverts water away from the foundation was missing at the back left corner. This is not compliant with the rule. Take the necessary steps to install all missing elbows. 10. At the time of the survey it was observed that the exterior of the home had dirt and algae build up. This is not compliant with the rule. Take the necessary steps to routinely clean the exterior of the home. 11. At the time of the survey it was observed that the exterior dryer cap had a screen which are prohibited due to the potential for lint building up which could be a potential fire hazard. This is not compliant with the rule. Take the necessary steps to remove the screen from the dryer cap.	C 174		
C 177	Building Service Equipment-Hot Water SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (d) The hot water tank shall be of such size to provide an adequate supply of hot water to the	C 177		

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C 177	Continued From page 4 kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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 water temperature was not within the required temperature range of 100 degrees Fahrenheit and 116 degrees Fahrenheit. The water temperature in the client bathroom was 98 degrees Fahrenheit. This is not compliant with the rule. Take the necessary steps to adjust the water heater temperature or repair the water heater as needed. NOTE: There exterior shell of the water heater was rusting which may be an indication that the water tank is beginning to fail and could begin leaking.	C 177		