STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL001151	A. BUILDING: **01** B. WING _____	**05/08/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EASTWAY FAMILY CARE	**108 EASTWAY LANE GRAHAM, NC 27253**

(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 May 8, 2025, from 10:10 AM to 11:10 AM at the above referenced facility. DHSR records indicate the home was first licensed on March 23, 2009 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 information we are requiring the home to maintain compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes, the 2006 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 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. 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 there were three (3) residents present at the time two live fire drills were conducted. The three residents were sitting at the dining room table and none responded when the smoke alarm was activated. This is not compliant with the rule. This home is licensed for six (6) ambulatory residents which means they should be able to respond to the fire alarm without verbal prompting or physical assistance. Take the necessary steps to train the residents to immediately evacuate the home any time the smoke detectors are activated. If a resident is unable to respond without assistance, he or she may need to be relocated to a facility that can better serve his or her safety needs or the facility will need to change the ambulatory status of the home.	C 105		

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C 146	Continued From page 2	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 there was a fairly new wooden ramp at the front entrance and an aluminum ramp at the left side deck which do not meet 2005 Family Care Home Rule of 1 foot of length for each 1 inch of height. The front ramp had a height of 18 inches and a length of 14 feet 2 inches and the handrails do not extend to the end of the ramp. The side ramp had a height of 26 inches and a length of 17 feet 8 inches. This is not compliant with the rule. Take the necessary steps to bring the ramps into compliance and approved by the local building official. Provide documentation from the local building official that the ramps meet NCSBC and have been approved.	C 146		
C 147	Outside Entrances/Exits-Single Hand Motion SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE	C 147		

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C 147	Continued From page 3 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 carport and living room storm doors had locking mechanisms that require special knowledge to operate. This is not compliant with the rule. Take the necessary steps to remove or disengage the security locks at the front and side storm doors.	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 there was only one handrail at the carport porch entrance. This is not compliant with the rule. Take the necessary steps to install a handrail and guardrails on both sides of the porch.	C 149		
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	C 172		

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C 172	Continued From page 4 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 drill logs indicated that the fire drills were being conducted one per quarter none of which were conducted while the residents were sleeping. Per the rule and NCSBC, fire drills are to be conducted 1st, 2nd and 3rd shift quarterly which would be a total of 3 per quarter. Per the conversation with the staff member, the smoke alarm is activated as well as verbalizing during the fire drill. This is not compliant with the rule. Take the necessary steps to conduct fire drills each shift per quarter without verbalizing and assisting the residents.	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 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 there was a large shrub growing against the house on the front right side and tree limbs at the back right corner. This is not compliant with the	C 174		

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C 174	Continued From page 5 rule. Take the necessary steps to remove and control the growth of vegetation. 2. At the time of the survey it was observed that the gutter is leaking and damaging the fascia at the inside corner by the deck entrance. This is not compliant with the rule. Take the necessary steps repair or replace. 3. At the time of the survey it was observed that the right gutter was full of leaves and the back right downspout was missing the diverter elbow. This is not compliant with the rule. Take the necessary steps to routinely clean the gutters and repair the downspout. 4. At the time of the survey it was observed that wooden stairs at the back have nail pops. This is not compliant with the rule. Take the necessary steps to repair or remove the stairs that are no longer needed. 5. 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. 6. At the time of the survey it was observed that the exterior dryer cap was full of lint causing the flap to stay partially open which has the potential for pests to build nests in the dryer vent line and block air discharge. This is not compliant with the rule. Take the necessary steps to routinely clean the lint from vent line and dryer cap. 7. At the time of the survey it was observed that the circuit for the smoke detectors was not labeled in the electrical panel. This is not compliant with the rule. Take the necessary steps	C 174		

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C 174	Continued From page 6 to identify the circuit that powers the smoke detectors and label the electrical panel. 8. At the time of the survey it was observed that the fire extinguishers were monitored quarterly and not monthly. This is not compliant with the rule. Take the necessary steps to ensure that the fire extinguishers are monitored monthly. 9. At the time of the survey it was observed that the front hall bath shower diverter knob was missing. This is not compliant with the rule. Take the necessary steps to repair or replace. 10. At the time of the survey it was observed that the toilets were loose at the base in the half bath and the back hall bathroom. This is not compliant with the rule. Take the necessary steps to secure the toilets at the base to prevent the potential for a leak that has the potential for slipping on water. 11. At the time of the survey it was observed that the back hall bathroom was misisng a towel bar and the vanity faucet aerator was missing causing the water to splash out of the sink basin. This is not compliant with the rule. Take the necessary steps to repair or replace. 12. At the time of the survey it was observed that the back hallway bathroom medicine cabinet had an unprotected receptacle inside the medicine cabinet. This is not compliant with the rule. Take the necessary steps to disconnect the receptacle from the power source and cap off the electrical socket and replace with a GFCI protected receptacle. 13. At the time of the survey it was observed that the two front bedrooms had reversed locksets	C 174		

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C 174	Continued From page 7 that would allow for the residents to be locked in their bedrooms. This is not compliant with the rule. Take the necessary steps to reverse or replace with passage knobs.	C 174		