Fax

TO: Kelly Myers FROM: Your Grace & Mercy F.C.H

FAX: (919) 733-6592 PAGES: 6

PHONE: (919) 303-1690 DATE: 05-30-25

RE: CC:

☐ Urgent ☑ For review ☑ Please comment ☑ Please reply ☐ Please recycle

Comments:

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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL001133	A. BUILDING: 01 B. WING _____	05/07/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
YOUR GRACE AND MERCY FAMILY CARE HOI	)19 ELM STREET BURLINGTON, NC 27217

(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 7, 2025, from 10:30 AM to 11:35 AM at the above referenced facility. DHSR records indicate the home was first licensed on June 10, 2009 as a Family Care Home for three (3) 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, the 2009 North Carolina State Residential Building Code - Section R101.2. 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 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 it was observed that there was a resident in a wheelchair that had difficulty navigating through the storm door during a live fire drill. This is not compliant with the rule. Take the necessary steps to install grab bars at the door inside and outside so that the resident can pull himself forward to open the door or remove the storm door.	C 105	Grab bars has been Installed on Inside and Outside of storm door. 5-10-25	
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	C 172	Your Grace & mercy, Well ensure a fire drill be conducted each quarter moving forward. 5-10-25	

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C 172	Continued From page 2 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 log indicated that the fire drills were not being conducted during each shift quarterly and drills were verbalized to prompt the residents. This is not compliant with the rule. Take the necessary steps to conduct fire drills by activating the smoke detector on 1st, 2nd and 3rd shifts quarterly with a description of how the drill was performed, date, time, staff present, number of residents present and the total time for evacuation from the home.	C 172	your Grace & mercy well ensure drills are conducted quarterly on each Shift 1st, 2nd, and 3rd. Drills well include activation of the smoke detectors and documentation of Date, Time, Shift and resident on site and a description of drill. 5-10-25	
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 bathroom 1 toilet was loose at the base and there was no toilet paper holder. This is not compliant with the rule. Take the necessary steps to repair these deficiencies. 2. At the time of the survey it was observed that bedroom 2 had a burnt-out light bulb. This is not compliant with the rule. Take the necessary steps	C 174	Loose toilet has been repaired, and Toilet Paper holder is in Place, weekly inspections will be conducted for safty. 5-10-25 Light bulb in Bed room 2 has been Put in Place 5-10-25	

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C 174	Continued From page 3 to replace burnt out light bulbs routinely. 3. At the time of the survey it was observed that bedroom 2 had an unsecured oxygen tank with no oxygen signage. This is not compliant with the rule. Take the necessary steps to secure or remove the oxygen tank. Any room that stores or has oxygen in use must have signage indicating that oxygen is present. 4. At the time of the survey it was observed there was mildew on the window and blind in bedroom 1. This is not compliant with the rule. Take the necessary steps to clean the window and blind routinely. 5. At the time of the survey it was observed that the laundry room fire extinguisher was not mounted, and the kitchen fire extinguisher was not monitored. This is not compliant with the rule. Take the necessary steps to mount and monitor the fire extinguishers. 6. At the time of the survey it was observed that there was a security alarm system that is no longer in use. This is not in compliance with the rule. Take the necessary steps to remove or bring the system to operating condition. 7. At the time of the survey it was observed that the back deck stairs had a loose handrail, and the side ramp post was loose. This is not compliant with the rule. Take the necessary steps to repair or replace the handrail and post. 8. It was observed that the front porch deck has loose boards. This is not compliant with the rule. Take the necessary steps to repair or replace the loose boards.	C 174	The unsecured oxygen tank in bedroom 2 was remoed 5-23-25. Mildew was cleaned from windows in bedroom 2 5-9-25 using Disinfectants, Routine cleaning once weekly. Both laundry room, and kitchen fire extinguishers, is properly mounted, staff well visually inspect once monthly 5-10-25 Out dated security alarm has been removed 5-9-25 Back deck handrail and side ramp post was repaired. 5-10-25 Loose Boards were repaired and secured 5-10-25	

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C 174	Continued From page 4 9. At the time of the survey it was observed that the exterior of the home had dirt built up on the vinyl siding. This is not compliant with the rule. Take the necessary steps to routinely clean the exterior of the home. 10. At the time of the survey it was observed that the outside storage building had a second level deck that was in disrepair and without handrails. This is not compliant with the rule. Take the necessary steps to block off any access to the stairs and upper platform.	C 174	Exterior vinyl siding was cleaned on 5-16-25 to remove all dirt built up. Your Grace & mercy have taken action to block all access to second-level deck of storage building using secured barriers 5-16-25	