

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>FCL079120</b>                    | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: <b>01</b><br><br>B. WING _____                                                | (X3) DATE SURVEY<br>COMPLETED<br><br><b>R</b><br><b>08/28/2025</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>HARRISONS CARING HANDS 5</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>704 WILLOW STREET</b><br><b>REIDSVILLE, NC 27323</b> |                                                                                                                          |                                                                    |
| (X4) ID<br>PREFIX<br>TAG                                            | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ID<br>PREFIX<br>TAG                                                                              | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                                           |
| {C 000}                                                             | Initial Comments<br><br>Report by David Hickman<br><br>DHSR Construction Section conducted a Biennial<br>Follow-up Survey on August 28, 2025 from 9:50<br>AM to 10:30 AM at the above referenced facility.<br>Not all of the previously cited deficiencies were<br>verified as being corrected. Therefore, further<br>action is required.<br><br>The remaining cited deficiencies are as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | {C 000}                                                                                          |                                                                                                                          |                                                                    |
| {C 109}                                                             | Construction-Two Stories<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0302 DESIGN AND<br>CONSTRUCTION<br>(f) If the building is two stories in height, it shall<br>meet the following requirements:<br>(1) Each floor shall be less than 2500 square<br>feet in area if existing construction or, if new<br>construction, shall not exceed the allowable area<br>for R-4 occupancy in the North Carolina State<br>Building Code;<br>(2) Aged or disabled persons are not to be<br>housed on any floor above or below grade level;<br>(3) Required resident facilities are not to be<br>located on any floor above or below grade level;<br>and<br>(4) A complete fire alarm system with pull<br>stations on each floor and sounding devices<br>which are audible throughout the building shall be<br>provided. The fire alarm system shall be able to<br>transmit an automatic signal to the local<br>emergency fire department dispatch center,<br>either directly or through a central station<br>monitoring company connection.<br><br>This Rule is not met as evidenced by: | {C 109}                                                                                          |                                                                                                                          |                                                                    |

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Service Regulation

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| {C 109}                                                             | Continued From page 1<br><br>1. At the time of the survey , it was observed that the house was a two story structure. The lower level is partially finished and being used to store the household items. At the present time there is no fire alarm installed in the house. This is not compliant with the rule. Take the necessary steps to install a complete fire alarm system with pull stations on each floor and sounding devices which are audible throughout the building. The fire alarm system must also be able to transmit an automatic signal to the local fire department dispatch center. This can be a direct transmit or through a central monitoring company.<br>* A monitored ADT system is in place. A panel needs to be added in the lower level area. | {C 109}                                                                                          |                                                                                                                          |                                                                    |
| {C 111}                                                             | Construction-Ceiling<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0302 DESIGN AND CONSTRUCTION<br>(h) The ceiling shall be at least seven and one-half feet from the floor.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey, it was observed that the added dropped ceiling in the lower level caused the ceiling height to measure 6 feet 11 inches. This is not compliant with the rule. Take the necessary steps to raise the ceiling height to a minimum of 7 feet 6 inches.<br>* The dropped ceiling needs to be removed or raised to a height of 7 feet 6 inches and needs to be installed properly.                                                                                                                             | {C 111}                                                                                          |                                                                                                                          |                                                                    |
| {C 147}                                                             | Outside Entrances/Exits-Single Hand Motion<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0312 OUTSIDE ENTRANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | {C 147}                                                                                          |                                                                                                                          |                                                                    |

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| {C 147}                                                             | Continued From page 2<br><br>AND EXITS<br>(d) All exit door locks shall be easily operable,<br>by a single hand motion, from the inside at all<br>times without keys. Existing deadbolts or turn<br>buttons on the inside of exit doors shall be<br>removed or disabled.<br><br>This Rule is not met as evidenced by:<br>1. At the time of the survey, it was observed that<br>the exit door on the left side of the living room did<br>not have single motion unlocking hardware. This<br>is not compliant with the rule. Take the necessary<br>steps to install the proper single motion unlocking<br>door hardware.<br>* This deficiency had not been corrected.                                                                                                                                                                                                                                    | {C 147}                                                                                          |                                                                                                                          |                                                                    |
| {C 174}                                                             | Building Equipment Maintained Safe, Operating<br><br>SECTION .0300 - THE BUILDING<br>10A NCAC 13G .0317 BUILDING SERVICE<br>EQUIPMENT<br>(a) The building and all fire safety, electrical,<br>mechanical, and plumbing equipment in a family<br>care home shall be maintained in a safe and<br>operating condition.<br>(j) This Rule shall apply to new and existing<br>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<br>the fire extinguishers were not being checked by<br>the staff monthly to evaluate the status of the<br>extinguisher. This is not compliant with the rule.<br>Take the necessary steps to have the staff<br>inspect the extinguishers once a month and date<br>the tags accordingly to prevent the extinguisher<br>from becoming damaged or losing its charge and<br>being unusable in a time of need. | {C 174}                                                                                          |                                                                                                                          |                                                                    |

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| {C 174}                                                             | <p>Continued From page 3</p> <p>* This deficiency had not been corrected.</p> <p>2. At the time of the survey, it was observed that there was a chain lock being used on the door to the kitchen. This is not compliant with the rule. Take the necessary steps to remove the chain lock.<br/>* This deficiency had not been corrected.</p> <p>3. At the time of the survey, it was observed that GFCI receptacle in the rear hallway bathroom was not tripping properly. This is not compliant with the rule. Take the necessary steps to repair or replace the receptacle so it works properly.<br/>* This deficiency had not been corrected.</p> <p>4. At the time of the survey, it was observed that there were open junction boxes and open receptacles without proper covers in the lower level. This is not compliant with the rule. Take the necessary steps to install the proper covers on the junction boxes and receptacles.<br/>* This deficiency had not been corrected.</p> <p>5. At the time of the survey, it was observed that there were ceiling tile tracks, wires and ceiling tiles hanging down and in a state of disrepair in the entire lower level. This is not compliant with the rule. Take the necessary steps to repair these areas in the lower level.<br/>* This deficiency had not been corrected.</p> <p>6. At the time of the survey, it was observed that the heat detector in the lower level did not have power and was not working properly. This is not compliant with the rule. Take the necessary steps to repair the heat detector.<br/>* This deficiency had not been corrected.</p> <p>7. At the time of the survey it was observed that</p> | {C 174}                                                                                          |                                                                                                                          |                                                                    |

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| {C 174}                                                             | Continued From page 4<br><br>the exterior exhaust vent for the dryer was<br>clogged with lint causing the dryer not to work<br>properly and also creating a possible fire ignition<br>hazard. This is not compliant with the rule. Take<br>the necessary steps to clean out the dryer<br>exhaust so the dryer will work properly and the<br>ignition hazard is reduced.<br>* The new dryer vent needs to be a hard piped<br>vent. | {C 174}                                                                       |                                                                                                                          |  |                                                                    |