

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL091017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 03/18/2015
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NAME OF PROVIDER OR SUPPLIER RISING HOPE HEALTH CARE SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 233 GHOLSON AVENUE HENDERSON, NC 27536
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(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	<p>Initial Comments</p> <p>Report by Paul Dixon</p> <p>DHSR Construction Section conducted a Biennial Survey on March 18, 2015 from 8:45 AM to 10:10 AM at the above referenced facility. DHSR records indicate the home was first licensed on July 14, 2014 as a Family Care Home for six (6) 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 2012 North Carolina State Building Code - Section 425.2 - Residential Care Homes.</p> <p>At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:</p>	C 000		
C 174	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT</p> <p>(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.</p> <p>(j) This Rule shall apply to new and existing family care homes.</p> <p>This Rule is not met as evidenced by:</p> <p>1. The two (2) outlets to the left of the kitchen sink have no power and the GFCI outlet will not reset. Have a qualified technician investigate and repair the outlets. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed</p>	C 174		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 174	<p>Continued From page 1</p> <p>work with you plan of correction.</p> <p>2. The kitchen range hood filter is very greasy. Have the filter cleaned or replaced. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>3. The bathroom exhaust fan in the 1st floor central bathroom is not working and the cover is clogged with dust. Have a qualified technician investigate and repair/replace the exhaust fan. Have the cover cleaned of dust. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>4. The clothes dryer exhaust duct is split and held together with masking tape. Have all of the tape removed and have the dryer exhaust duct replaced. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>5. The exterior flapper assembly for the clothes dryer exhaust is damaged beyond repair. Have the exterior flapper assembly replaced. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.</p> <p>6. The cover for the exhaust fan in the 2nd floor bathroom is clogged with dust. Have the cover cleaned. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed</p>	C 174		

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C 174	Continued From page 2 work with you plan of correction.	C 174		
C 183	<p>Outside Premises-Clean, Safe</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> 1. At the rear of the home, there is a screened in porch. Many of the screens on the porch are damaged. Have all of the damaged screens replaced. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 2. In the back yard, there is a large amount of trash and debris. Have all of the trash and debris removed from the yard and properly disposed of. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 3. On the ramp at the side of the home, one of the decking boards has popped up creating a tripping hazard. Several pickets have come loose, and a section of railing has also come loose. Have all of the loose, boards, pickets and railings secured. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 4. On the 2nd floor exterior exit stairs, one of the stair treads has come loose. Have the tread 	C 183		

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C 183	Continued From page 3 secured. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.	C 183		