

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL051044	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 03/18/2015
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NAME OF PROVIDER OR SUPPLIER CLARK'S FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 167 SALEEN DRIVE WILLOW SPRING, NC 27592
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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 Tommy Clifton</p> <p>DHSR Construction Section conducted a Biennial Survey on March 18, 2015 at the above referenced facility. DHSR records indicate the home was first licensed on July 05, 2011 as a Family Care Home for four 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 and the 2009 Edition of the North Carolina State Building Code - Section 421.2 - 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 152	<p>Floors</p> <p>10A NCAC 13G .0314 FLOORS (a) All floors in a family care home shall be of smooth, non-skid material and so constructed as to be easily cleanable. (b) Scatter or throw rugs shall not be used. (c) All floors shall be kept in good repair.</p> <p>This Rule is not met as evidenced by: Throw rugs were observed in the living room, kitchen and the exit door in the living room.</p>	C 152		
C 174	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE</p>	C 174		

Division of Health Service Regulation
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>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 kitchen range hood light does not work. Have a qualified person repair or replace the light in the range hood. Provide our office a copy of the receipt when the work is completed.</p> <p>(2) Smoke detectors located in bedroom #1 (two Bed) and hallway outside the bedrooms did not activate when tested. Have a qualified person repair or replace the smoke detectors and verify they are interconnected to all smoke detectors in the home. Provide our office a copy of the receipt when the work is completed.</p> <p>(3) The outside dryer vent has lint in the vent and needs cleaning. Clean out the dryer vent and put it on a maintenance schedule.</p> <p>(4) The gutters are full of pine straw and need cleaning out. Clean out gutters and put it on a maintenance schedule.</p>	C 174		