

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL029001 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____ | (X3) DATE SURVEY COMPLETED 02/10/2015 |
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| NAME OF PROVIDER OR SUPPLIER WESTANNA FAMILY CARE | STREET ADDRESS, CITY, STATE, ZIP CODE 716 WEST 5TH STREET LEXINGTON, NC 27292 |
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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 Rick Benton</p> <p>DHSR Construction Section conducted a Biennial Survey on February 10, 2015 from 1:00 PM to 2:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on July 27, 1994 as Family Care Home for six 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 1992 "Family Care Homes T10: 42C", the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 Edition of the North Carolina State Building Code w/ 1994 revisions - Section 514.1 - Exception #1 - 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 144 | <p>Outside Entrances/Exits-Two Remote Exits</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS</p> <p>(a) In family care homes, all floor levels shall have at least two exits. If there are only two, the exit or exit access doors shall be so located and constructed to minimize the possibility that both may be blocked by any one fire or other emergency condition.</p> <p>This Rule is not met as evidenced by: 1) At the time of this survey, it was noted that the upstairs staff apartment does not have a second</p> | C 144 | | |

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

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| C 144 | <p>Continued From page 1</p> <p>means of egress. After a careful onsite review of the facility property and onsite discussions with the provider, it was determined that the second means of egress can be constructed without any encroachment to the adjoining property and without interference with any local setback requirements that have been established by the local jurisdiction.</p> <p>The 1987 "Family Care Homes - Minimum Standards and Regulations states in section C(8) (a) that "All floor levels must have at least two exits". The required second or upper exit door would have to meet the minimum clear width of two feet eight inches. Since family care rules do not allow for any residents to reside in the upper level of the home, it is however occupied by a live in staff person which is allowed.</p> <p>There is an existing chain ladder for the staff person to use in the event of an emergency, but that does not meet the requirement of the licensure rule or building code requirements of Section 419.2. To maintain compliance to both Code and Rule requirements have a qualified technician to construct a second exit for the upstairs apartment with a landing and stairs down to the ground level as per our onsite conversation.</p> <p>Once completed please provide to our office copies of all necessary permits and approvals for the construction of the remote exit from your local jurisdiction for verification of the completed work.</p> | C 144 | | |
| C 174 | <p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE</p> | C 174 | | |

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| C 174 | <p>Continued From page 2</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) At the time of this survey, it was noted that the upstairs staff apartment's GFCI outlet to the right of the kitchen sink was extremely loose, which resulted in a minor connection issues when resetting the GFCI after testing. Schedule to have a qualified person make the necessary corrections to the outlet.</p> <p>2) At the time of this survey, it was noted that the kitchen range hood fan was making a humming sound which indicated that the fan was not working, binding fans can result in fires if not promptly repaired, schedule to have the range hood replaced by a qualified person. Provide to our office a copy of the purchase receipt for the range hood for verification of the completed work.</p> | C 174 | | |