

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL065001</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/27/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>JUDGE FAMILY CARE HOME #1</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>400 JUDGES ROAD WILMINGTON, NC 28405</b>
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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>This report is of a biennial construction survey done by Bob Getchell on May 27, 2015.</p> <p>This facility was first licensed as a Family Care Home for five (5) ambulatory residents on November 7, 1984. Based on this we are requiring the home to be in compliance with the 1984 and the applicable portions of the 2005 "Rules 10A NCAC 13G for the Licensing of Family Care Homes", the 1968 Uniform Residential Building Code, and, the 1978 (w/ revisions) North Carolina State Building Code, Section 409.1(g) - Residential Care Homes.</p> <p>Deficiencies were noted which will require a new plan of correction.</p>	C 000		
C 117	<p>Have Current San. And Fire Safety Approvals</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the current fire and sanitation reports were not available at the time of the survey.</p> <p>Findings include: The following reports were not available at the time of the survey: a) Sanitation Report, b) Fire Marshalls Report.</p>	C 117		

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

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C 149	Continued From page 1	C 149		
C 149	<p>Outside Entrances/Exits-Handrails At Porches</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, egress from all areas was not maintained in a safe manner by having a section of handrail missing. This would affect all residents by not allowing safe egress in an emergency.</p> <p>Findings include: a) The front exit ramp has a 4 foot section of handrail missing at the bottom of the ramp.</p>	C 149		
C 168	<p>Fire Extinguishers</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (a) Fire extinguishers shall be provided which meet these minimum requirements in a family care home: (1) one five pound or larger (net charge) "A-B-C" type centrally located; (2) one five pound or larger "A-B-C" or CO/2 type located in the kitchen; and (3) any other location as determined by the code enforcement official.</p> <p>This Rule is not met as evidenced by: 1. Based on observation, the building fire protection equipment was not maintained in an operable manner. This would affect all residents by not having fire protection equipment operable</p>	C 168		

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C 168	Continued From page 2  for use in an emergency.  Findings include: The inspection tags on the fire extinguishers indicate that required monthly checks are not being performed per NFPA 10	C 168		
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. Based on observation, the building components were not maintained in an operable manner by having doors that did not close completely and latch in order to contain smoke and fire. This could affect all residents by not containing smoke or fire in the fire compartment or room of origin.  Findings include: The back left bedroom door will not latch.	C 174		