

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL012042</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/10/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CLARA'S COTTAGE FAMILY CARE HOME # 1</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5820 HOLLAND STREET MORGANTON, NC 28655</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>Report by Suzanna Fay</p> <p>DHSR Construction Section conducted a Biennial Survey on May 10, 2016 from 1:40 PM to 2:41 PM at the above referenced facility. DHSR records indicate the home was first licensed on October 3, 1989 as a 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 1984 (1987 Revision) Family Care Homes Minimum Standards and Regulations, applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1978 (Revision 9) North Carolina State Building Code - Section 409.1 (g) - 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: 1. Observations revealed that the outlet at the front porch indicated that it was "open ground" and did not trip when tested. Have a qualified</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	Continued From page 1  technician repair or replace the outlet. Provide documentation of the repairs in the form of receipts or work orders.  2. Observations revealed that the sink faucet in Bath 2 was loose. Have a qualified technician tighten and seal the faucet. Provide documentation of the repairs in the form of receipts or work orders.  3. Observations revealed that the fan in Bath 1 was not working at the time of this survey. Have a qualified technician repair or replace the fan. Provide documentation of the repairs in the form of receipts or work orders.  4. Observations revealed a section of siding was popping off at the back of the facility between the two bedroom windows. Have a qualified technician secure the siding. Provide documentation of the repairs in the form of photos, receipts or work orders.	C 174		
C 123	Outside Entrances/exits  IV. The Building C. Physical Environment 8. Outside Entrances/Exits (10 NCAC 42C .2209) a. All floor levels must have at least two exits. If there are only two, the exits must be as remote from each other as reasonably possible. b. At least one entrance/exit door must be a minimum clear width of three feet and another must be a minimum clear width of two feet and eight inches. c. At least two outside entrances/exits for the residents' floor level must be at ground level or accessible by ramp with a 1 inch rise for each 12	C 123		

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C 123	<p>Continued From page 2</p> <p>inches of length of the ramp. If there are only two entrances/exits, the entrances/exits must be as remote from each other as reasonably possible. (The requirement for the ramp at exits not at ground level applies to homes which have at least one resident who needs personal assistance in getting up or down steps.)</p> <p>d. All exit doors locks must be easily operable, by a single hand motion, from the inside at all times without keys. (This limits each door to one locking device which meets the criteria set forth in this standard.)</p> <p>e. All entrances/exits must be free of all obstructions or impediments to allow for full instant use in case of fire or other emergency.</p> <p>f. All steps, porches, stoops and ramps must be provided with handrails and guardrails.</p> <p>g. In homes with at least one resident who is determined by a physician or is otherwise known to be disoriented or a wanderer, each required exit door must be equipped with a sounding device that is activated when the door is opened. The sound must be of sufficient volume that it can be heard by staff. A central control panel that will deactivate the sounding device may be used, provided the control panel is located in the bedroom of the person on call within the home.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the storm doors at both the front exit and the exit from the laundry room had thumb latches that are not single action. Remove or disable the thumb latches so that the Residents are able to exit using one single motion. Provide documentation of the repairs in the form of photos, receipts or work orders.</p>	C 123		