



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

MARK PAYNE
DIRECTOR

March 12, 2018

Jamie Kirby-(via e-mail only)
3208 Tex's Fishcamp Road
Connelly Springs, NC 28612

CONSTRUCTION SECTION

MAR 29 2018

RECEIVED

RE: East View Family Care - FC Biennial Survey
3208 Tex's Fishcamp Road
Connelly Spg Burke County
FID #920342 Fcl012033

Dear Ms. Kirby:

Thank you for the cooperation and courtesies extended during the recent Division of Health Service Regulation (DHSR) – Construction Section Biennial survey of your facility on March 6, 2018. As a result of the survey, deficiencies were cited which will require an acceptable Plan of Correction. The deficiencies cited are listed on the enclosed Statement of Deficiency. Your Plan of Correction should indicate the following:

- What corrective action(s) will be accomplished in those areas of the facility found to have been affected by the deficient practice;
- How you will identify other areas of the facility having the potential to be affected by the same deficient practice and what corrective action will be taken;
- What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur; and,
- How the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place.

CONSTRUCTION SECTION

WWW.NCDHHS.GOV • WWW.NCDHHS.GOV/DHSR

TEL 919-855-3893 • FAX 919-733-6592

LOCATION: WILLIAMS BUILDING, 1800 UMSTEAD DRIVE • RALEIGH, NC 27603

MAILING ADDRESS: 2705 MAIL SERVICE CENTER • RALEIGH, NC 27699-2705

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

- Include dates when corrective action will be completed. The corrective action dates must be acceptable to the State.
 1. Corrective action must begin immediately.
 2. Any completion date greater than 45 days from date of survey requires a written waiver from DHSR-Construction Section.

Please type or print clearly your correction action on the enclosed Statement of Deficiencies. You will need to **SIGN, DATE AND RETURN** the Plan of Correction to DHSR-Construction by March 27, 2018. Failure to return the signed Plan of Correction within this time period could jeopardize the status of your license. The PROVIDER may copy form(s) to be retained for your files.

Your Plan of Correction can be:

Mail to: DHSR Construction Section
2705 Mail Service Center
Raleigh NC 27699-2705

Fax to: (919)-733-6592

Email to: DHSR.Construction.Admin@dhhs.nc.gov

Prior to making any changes to your facility you will need to verify with the local Building Official whether or not a permit is needed to make the changes on the enclosed Statement of Deficiencies. The North Carolina State Building Code requires that "No person, firm or corporation shall erect, construct, enlarge, install, alter, repair, move, improve, convert or demolish any building, structure, or service system without first obtaining a permit for such from the Inspection Department having jurisdiction".

Informal Dispute Resolution

In accordance with G.S. § 131D-2.11(a2), you have one opportunity to question cited deficiencies through an informal dispute resolution (IDR) process. You may also contest the severity of noncompliance that resulted in a violation determination. To be given such an opportunity, you are required to send your written request identifying the specific deficiencies being disputed postmarked by March 27, 2018. An explanation of why you are disputing those deficiencies (or why you are disputing the severity of noncompliance that resulted in a violation determination) along with any supporting documentation must be sent and postmarked by March 27, 2018. You must submit 2 copies of material and highlight or use some other means to identify written information pertinent to the disputed deficiency(ies). Additional written material that does not meet these requirements will not be reviewed. This information should be sent to: Steven C. Lewis, Construction Section Chief, 2705 Mail Service Center, Raleigh NC 27699-2705. An incomplete informal dispute resolution process will not delay the effective date of any enforcement action. IDR Procedures can be accessed at: <http://www.ncdhhs.gov/dhsr/acls/idr.html>.

Please do not hesitate to call us if you have questions concerning the deficiencies or if we can be of other assistance.

Sincerely,

Greg Williams

Greg Williams
Architectural/Engineering Technician
DHSR - Construction Section

cc: Adult Care Licensure Section-with attachment
County Building Inspection Department - with attachment-(via e-mail only)
Burke County DSS - with attachment-(via e-mail only)

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL012033	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/06/2018
NAME OF PROVIDER OR SUPPLIER EAST VIEW FAMILY CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 3208 TEX'S FISHCAMP ROAD CONNELLY SPG, NC 28612		
(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	Initial Comments Report by Greg Williams DHSR Construction Section conducted a Biennial Survey on March 6, 2018 from 11:00 AM to 12:15 PM at the above referenced facility. DHSR records indicate the home was first licensed on January 10, 1986 as a Family Care Home for six (6) ambulatory Residents (who are able to respond and evacuate without physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: The 1984 Minimum Standards and Regulations for Family Care Homes, the applicable portions of the 2005 Rules for Family Care Homes 10A NCAC 13G, and the 1978 (Rev 10) North Carolina State Building Code - Section 409.1(g) - Residential Care Homes At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 148	Outside Entrances/Exits-Free of Obstructions SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (e) All entrances/exits shall be free of all obstructions or impediments to allow for full instant use in case of fire or other emergency. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that there was a chain latch lock on the Staff Bedroom door. This rule requires all entrances/exits be free of obstructions in the case of an emergency.	C 148	The lock was removed before the Inspector left and will not be back on the door.	

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

5859

RXDB21

If continuation sheet 1 of 2

Jamie R Kuty

Admin

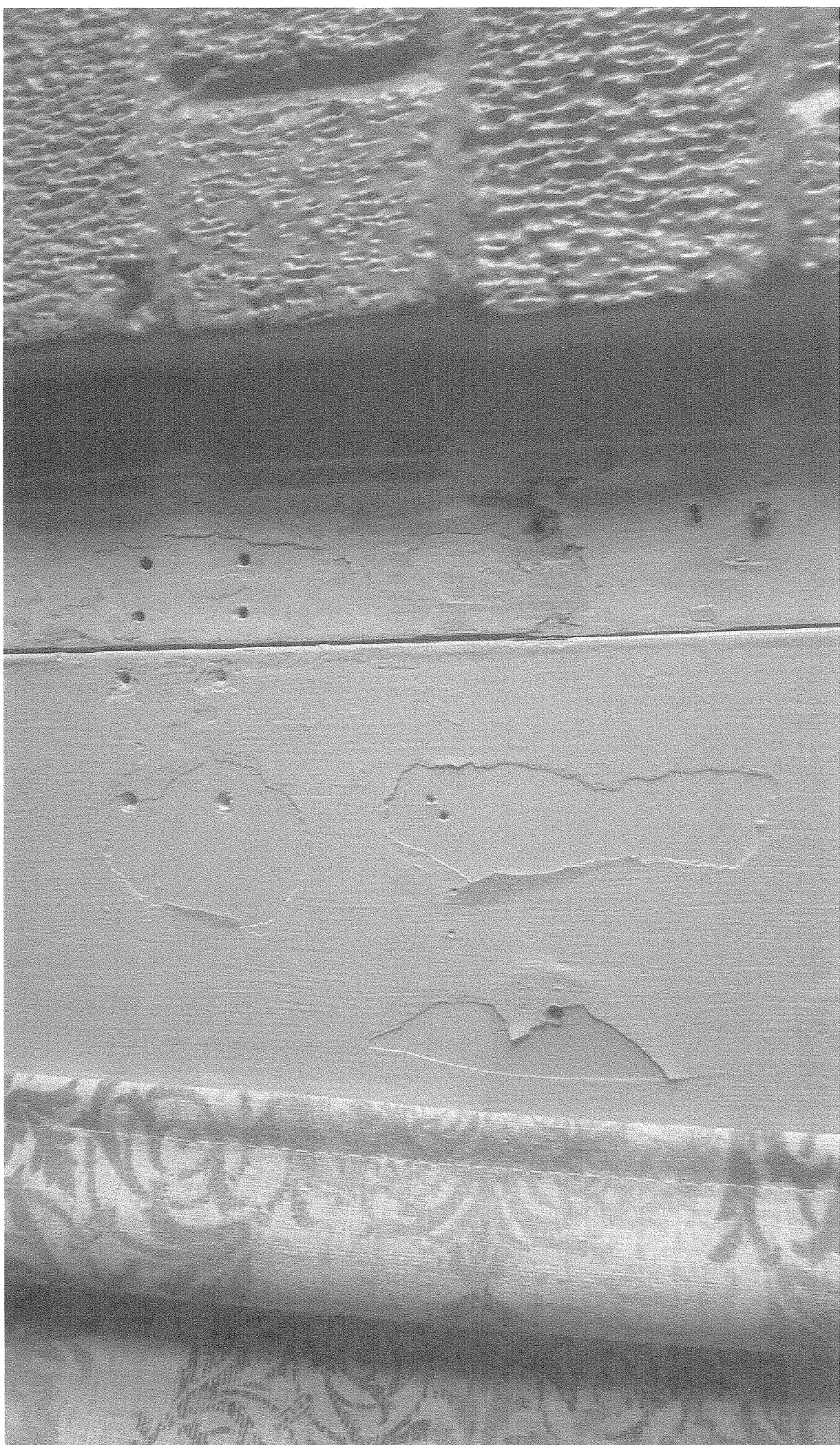
3-20-18

With 4 Photo's

Division of Health Service Regulation

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C 183	Continued From page 1	C 183		
C 183	Outside Premises-Clean, Safe 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. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that there was a build-up of algae on the brick surfaces of the exit landing and stairs on the right side of the facility. * For all deficiencies listed above provide documentation of completed work in the form of photographs, receipts, invoices, etc. All deficiencies listed above were discussed with on-site staff during the exit interview.	C 183	The brick and exit landing have been cleaned all algae & moss have been removed and cleaned. We have had alot of rain and cloudy days is the reason, it was one the house we have had a month of rain solid. The home aways pressure washes down the facility in April and September.	

lock is off the door
was before the Inspector left.





All Moss + Algae is gone
Pressure washed +
cleaned.



All Moss and Algae is gone

All Algae & Moss gone

