STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL078117	A. BUILDING: **01** B. WING _____	**05/15/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
B & B ASSISTED LIVING # 2	**2610 HWY 130 WEST ROWLAND, NC 28383**

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C 000	Initial Comments Report by Jonathan Gamsey DHSR Construction Section conducted a Virtual Biennial Survey on May 15, 2024 from 02:50 PM to 3:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on September 12, 1996 as a Family Care Home for six (6) Residents with no more than three who are non-ambulatory (who are unable 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 "Rules for Family Care Homes Minimum and Desired Standards and Regulations," applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1996 North Carolina State Building Code - Section 419.3 - Small Residential Care Facilities. NOTES: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with on-site staff during the exit interview. 2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed. The cited deficiencies are as follows:	C 000		
C 105	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING	C 105		

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C 105	Continued From page 1 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars ($380.00). (b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that there was wood veneer paneling being used as wall covering in part of bedroom #4. This paneling does not provide a one hour rating as required by the building code. This is not compliant with the rule. Take the necessary steps to remove the paneling and apply a fire-retardant material capable of marinating the one-hour rated requirement.	C 105		
C 130	Bedrooms-Windows SECTION .0300 - THE BUILDING 10A NCAC 13G .0308 BEDROOMS	C 130		

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C 130	Continued From page 2 (g) Each resident bedroom must have one or more operable windows and be lighted to provide 30 foot candles of light at floor level. The window area shall be equivalent to at least eight percent of the floor space. The windows shall have a maximum of 44 inch sill height. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the staff bedroom does not have a window but a means of emergency egress thru a door directly to the exterior of the facility. Per 1203.1 Minimum requirement, 1203.1.1 states" Every habitable room of buildings hereafter erected shall have one or more windows, unless otherwise specifically provided herein, to afford adequate light and ventilation. The requirements specified in this section shall be considered as minimum requirements supplementary to all state laws regulating light and ventilation. Due to the facility having an emergency egress in the bedroom in the form of the door, DHSR will accept meeting 1203.1.4 Except as otherwise provided herein, required windows shall have glazed openings of clear glass of area not less than 8% of the floor area of the room served by them. Install a window on the door to allow natural light in to meet the 8% of the floor area of the room.	C 130		
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:	C 148		

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C 148	Continued From page 3 1.) At the time of the survey, it was observed that the dining room door had a lock set on it. This is not compliant with the rules. Take the necessary steps to install a passage lock on the door to allow access in a time of need.	C 148		
C 149	Outside Entrances/Exits-Handrails At Porches 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. This Rule is not met as evidenced by: 1.) At the time of the survey it was observed that the railing and handrails for the ramp did not extend to the end of the ramp. This is not compliant with the rule. Take the necessary steps to extend the railing and handrails to the end of the ramp.	C 149		
C 169	Fire Safety-Smoke Detectors SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (b) The building shall be provided with smoke detectors as required by the North Carolina State Building Code and U.L. listed heat detectors connected to a dedicated sounding device located in the attic and basement. These detectors shall be interconnected and be provided with battery backup. Note: Smoke detectors are required to be interconnected by this Rule. The application of the Rule permits the heat detectors to be interconnected with smoke detectors, but does not require it.	C 169		

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C 169	Continued From page 4 This Rule is not met as evidenced by: 1.) At the time of the survey surveyor was unable to go into the attic to verify if a heat detector was installed. Take the necessary steps to provide documentation of heat detectors in the attic. 2.) At the time of the survey, it was observed that multiple smoke detectors are past the 10-year lifespan. Per NFPA 72 10.4.7 states " that "Smoke Alarms", installed in one and two family dwellings "shall not remain in device for more than ten years from the date of manufacture"." This is not compliant with the rule. Take the necessary steps to replace all smoke detectors in the facility that are past the 10-year lifespan and monitor the rest.	C 169		
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.) At the time of the survey, it was observed that the laundry room had had to be repaired and the wall had exposed plumping. This is not compliant with the rule. Once the repairs are completed take the necessary steps to repair the wall back to its original condition.	C 174		

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C 174	Continued From page 5 2.) At the time of the survey, it was observed that the hallway bathroom had a loose toilet at the base causing a potential for leaks to happen and for residents to be injured when using the facilities. This is not compliant with the rule. Take the necessary steps to secure the toilets to prevent any leaks or possible injuries. 3.) At the time of the survey, it was observed that the hall bathroom had a globe on the light fixture. This is not compliant with the rule. Take the necessary steps to install a new light globe on the fixture. 4.) At the time of the survey, it was observed that the bedroom #1 window was hard to open. This could impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair and or replace a window if needed. 5.) At the time of the survey, it was observed that bedroom #1 window was cracked. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 6.) At the time of the survey, it was observed that the smoke detector in bedroom #1 was located too close to the paddle blades of a ceiling fan. This is not compliant with the rule. Smoke detectors need to be further than 3 feet from fans to ensure proper function. Remove the fan and or relocate the smoke detector in the room. 7.) At the time of the survey, it was observed that bedroom #3 window was hard to open. This could impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair and or replace a window if needed. 8.) At the time of the survey, it was observed that	C 174		

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C 174	Continued From page 6 the smoke detector in bedroom #3 was located too close to the paddle blades of a ceiling fan. This is not compliant with the rule. Smoke detectors need to be further than 3 feet from fans to ensure proper function. Remove the fan and or relocate the smoke detector in the room. 9.) At the time of the survey, it was observed that bedroom #2 window will not stay open on its own. This could impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 10.) At the time of the survey, it was observed that the smoke detector in bedroom #2 was located too close to the paddle blades of a ceiling fan. This is not compliant with the rule. Smoke detectors need to be further than 3 feet from fans to ensure proper function. Remove the fan and or relocate the smoke detector in the room. 11.) At the time of the survey, it was observed that the attached bathroom to bedroom #2 had a loose toilet at the base causing a potential for leaks to happen and for residents to be injured when using the facilities. This is not compliant with the rule. Take the necessary steps to secure the toilets to prevent any leaks or possible injuries. 12.) At the time of the survey, it was observed that the staff bedroom ceiling fan has an exposed electrical wire, which could potentially lead to an electrical shock. This is not compliant with the rule. Take the necessary steps to repair and or replace a ceiling fan. 13.) AT the time of the survey, it was observed that the bedroom #6 light fixture was missing a globe. This is not compliant with the rule. Take	C 174		

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C 174	Continued From page 7 the necessary steps to replace the globe on the light fixture. 14.) At the time of the survey, it was observed that the smoke detector in bedroom #6 was located too close to the paddle blades of a ceiling fan. This is not compliant with the rule. Smoke detectors need to be further than 3 feet from fans to ensure proper function. Remove the fan and or relocate the smoke detector in the room. 15.) At the time of the survey, it was observed that the bedroom #5 light fixture was missing a globe. This is not compliant with the rule. Take the necessary steps to replace the globe on the light fixture. 16.) At the time of the survey, it was observed that the smoke detector in Bedroom #5 was located too close to the paddle blades of a ceiling fan. This is not compliant with the rule. Smoke detectors need to be further than 3 feet from fans to ensure proper function. Remove the fan and or relocate the smoke detector in the room. 17.) At the time of the survey, it was observed that the window in bedroom #4 would not stay open on its own. This could potently impede egress in a time of need. This is not compliant with the rule. Take the necessary steps to repair and or replace the window. 18.) At the time of the survey, it was observed that the smoke detector in bedroom #4 was located too close to the paddle blades of a ceiling fan. This is not compliant with the rule. Smoke detectors need to be further than 3 feet from fans to ensure proper function. Remove the fan and or relocate the smoke detector in the room.	C 174		

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C 174	Continued From page 8 19.) At the time of the survey, it was observed that the staff bedroom's smoke detector was not working. This is not compliant with the rule. Take the necessary steps to replace it and ensure it is still interconnected and hardwired. 20.) At the time of the survey, it was observed that bedroom #4 and 6 smoke detectors were not working. This is not compliant with the rule. Take the necessary steps to replace it and ensure it is still interconnected and hardwired.	C 174		
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 the concrete patio is not level with the grade of the ground. There is a step down from the patio to the ground. This is not compliant with the rule. Take the necessary steps to raise the grade of the ground to be level with the concrete patio and provide an appropriate slope of grade from the patio to the ground.	C 183		