STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL096009	A. BUILDING: _____ B. WING _____	R 06/16/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANTHAM FAMILY CARE # II	107 N GEORGIA AVENUE GOLDSBORO, NC 27530

(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 The Adult Care Licensure Section conducted an annual and follow-up survey on 06/16/26.	C 000		
C 034	10A NCAC 13G .0302 (n) Design and Construction 10A NCAC 13G .0302 Design and Construction (n) The facility shall maintain and have available for review current sanitation and fire safety inspection reports. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure a fire safety inspection report was current and maintained in the facility and available for review. The findings are: Review of the facility's current license effective 01/01/26 revealed: -The capacity was 6 ambulatory residents. -The license would expire on 12/31/26. Observation of the facility on 06/16/26 at 8:30am revealed there were 3 residents and the Administrator present. Interview with the Administrator on 06/04/26 at 8:30am revealed the current census at the facility was 4 residents and one resident was out of the facility. Review of the facility's most recent provided Fire Inspection Safety Report revealed:	C 034		

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C 034	Continued From page 1 -The date of inspection was documented as 12/30/24. -The status was documented inspection status was "passed". -There were no comments in the area provided for miscellaneous comments. Interview with the Administrator/Owner on 06/16/26 at 10:27am revealed: -The last fire inspection she had was dated 12/30/24. -She knew a fire inspection was required annually. -It was her responsibility to make sure the facility had annual fire inspections. -She had not contacted anyone to come complete the fire inspection because she did not think about the fire inspection much and kept putting it off. Attempted telephone interview with the Fire Marshal on 06/16/26 at 11:01 was unsuccessful.	C 034		
C 257	10A NCAC 13G .0904(a)(1) Nutrition and Food Service 10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (1) Food services shall comply with Rules Governing the Sanitation of Residential Care Facilities set forth in 15A NCAC 18A .1600 which are hereby incorporated by reference, including subsequent amendments, assuring storage, preparation, and serving food under sanitary conditions.	C 257		

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C 257	Continued From page 2	C 257		

This Rule is not met as evidenced by:
Based on observations, interviews,and record reviews, the facility failed to ensure all food items stored by the facility were protected from contamination related to unlabeled undated food stored in the freezer.

The findings are:

Review of the facility's current license effective 01/01/26 revealed:
-The capacity was 6 ambulatory residents.
-The license would expire on 12/31/26.

Observation of the facility on 06/16/26 at 8:30am revealed there were 3 residents and the Administrator present.

Interview with the Administrator on 06/04/26 at 8:30am revealed the current census at the facility was 4 residents and one resident was out of the facility.

Review of the most recent provided Environmental Health Inspection of Residential Care Facility revealed:
-The inspection was dated 06/05/25.
-There were 3 demerits.
-The facility had a status code of an "A".

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C 257	Continued From page 3 -Classification was documented as "Approved" (40 or less demerits and no 6-point demerits). Observation of the side-by-side refrigerator freezer located in the dining room on 06/16/26 at 12:27pm revealed: -There was a zip closure storage bag with smoked sausage cut into approximately 3 inch pieces with no date or label. -There was a zip closure storage bag with raw pork chops with no date or label. -There was a zip closure storage bag with raw pig ears with no date or label. -There was a zip closure storage bag with raw chicken wings with no date or label. -There was a zip closure storage bag with raw chicken pieces with no date or label. -There was a zip closure storage bag with sliced raw mushrooms with no date or label. -There was a zip closure storage bag with imitation crab legs with no date or label. Telephone interview with the Administrator on 06/16/26 at 12:26pm revealed: -She was aware items not stored in the original package should be dated and labeled. -She was responsible for storage of food when groceries were delivered and after meals were served. -She sometimes got busy while putting groceries away and did not date or label the items for storage.	C 257		