STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL001144	A. BUILDING: **01** B. WING _____	**03/19/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
B AND N FAMILY CARE HOME	**301 HOMEWOOD AVENUE** **BURLINGTON, NC 27217**

(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 Paul Dixon DHSR Construction Section conducted a Biennial Survey on March 19, 2015 from 12:20 PM to 1:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on October 1, 1970. Licensure rules at that time only allowed for a maximum of five residents. Effective February 1, 1983 the building code was amended to allow for a maximum of six all ambulatory residents. This facility is currently licensed as a Family Care Home for six (6) 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 Family Care Homes Minimum Standards and Regulations, the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes, the 1978 Rev 5 North Carolina State Building Code - Section 409.1(g) - Residential Care Facilities. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
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.	C 174		

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C 174	Continued From page 1 This Rule is not met as evidenced by: 1. In the kitchen range hood, the filter is missing. Locate or obtain a filter and install it in the range hood. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 2. In the Bathroom next to the kitchen, the exhaust fan is frozen up, and the fan cover is clogged with dust. Have the cover cleaned and have a qualified technician investigate and repair/replace the fan. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 3. In the laundry room and in Bedroom #3, there is a ceiling light in each room with no bulb. The staff on site stated that the lights do not work. Either have the lights repaired or have a qualified technician remove the light fixtures, cap the wires and install a blanking plate on the electrical boxes. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.	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. On the right side of the front porch, there is a	C 183		

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C 183	Continued From page 2 section of soffit missing above the entry ramp. Have the missing section of soffit replaced. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction. 2. On the left side of the front porch, there is a section of aluminum fascia missing exposing raw wood to the elements. Have the missing section of fascia replaced. Proof of completed work must be provided by way of receipts, invoices, photographs, etc. Forward proof of completed work with you plan of correction.	C 183		