

(P1)

PRINTED: 03/24/2017
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL001089	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/14/2017
NAME OF PROVIDER OR SUPPLIER C & M ADULT CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 422 N MAIN STREET 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)	(X6) COMPLETE DATE
C 000	Initial Comments Report by Suzanna Fay DHSR Construction Section conducted a Biennial Survey on March 14, 2017 from 10:07 AM to 11:39 AM at the above referenced facility. DHSR records indicate the home was first licensed on November 19, 1991 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 1991 Family Care Homes Minimum Standards and Regulations, applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2006 North Carolina State Building Code - Section 519.1, Exception 1 - 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 153	Housekeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: 1. Observations revealed that the ceiling of the Staff bath was cracked and peeling in the corner	C 153	my staff bathroom wall will be painted I will make sure it has primer on it before painted so hopefully it will not crack and pictures will be sent for proof of completion TITLE SIC Conette Wilson	4-15-17

Division of Health Service Regulation

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

(X8) DATE 3-31-17

STATE FORM

4900

OQ2Y21

If continuation sheet 1 of 3

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MAR 31 2017

CONSTRUCTION SECTION

Division of Health Service Regulation

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C 153	Continued From page 1 by the door. Have a qualified technician repair the ceiling finish. Provide documentation of the repairs in the form of photos or receipts.	C 153	once again you will receive before and after pictures with receipt of the paint	4-15-17
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. (i) This Rule shall apply to new and existing family care homes: This Rule is not met as evidenced by: 1. Observations revealed that the emergency light outside of the dining room did not work when tested. Have a qualified technician repair the light. Provide documentation of the repairs in the form of photos or receipts. 2. Observations revealed that the downspout at the back left corner of the facility had fall off. Have a qualified technician reattach the downspout. Provide documentation of the repairs in the form of photos or receipts.	C 174		
			The light emergency in the hallway battery will be replaced will show receipt A new battery	4-4-17
			The downspout has been completed. You shall receive a picture of it being up showing the screw that is holding it up. hopefully the lawn care person will not tear down.	3-24-17
C 143	Outside Exits-Locks Single Hand Motion IV. The Building C. Physical Environment (10 NCAC 42C .2201) 8. Outside Entrances/Exits (10 NCAC 42C .2209) 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	C 143	The latch on the front and back door has been dismantle already but Even tape is on it so it won't catch at all. I will send photos of the door and the pieces that was removed.	3-29-17

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C 143	Continued From page 2 this standard.) This Rule is not met as evidenced by: 1. Observations revealed that the screen door at the dining room exit had a thumb latch that is not single action. Have a qualified technician remove or disable the thumb latch. Provide documentation of the repairs in the form of photos or receipts.	C 143			
			The thumb latch has been removed will show pictures of evidence removed	3-29-17	
C 148	Floors IV. The Building C. Physical Environment (10 NCAC 42C .2201) 10. Floors (10 NCAC 42C .2211) a. All floors must be of smooth, non-skid material and so constructed as to be easily cleanable. b. Scatter or throw rugs are not to be used. c. All floors must be kept in good repair. This Rule is not met as evidenced by: 1. Observations revealed that the vinyl floors throughout the main level were not maintained. The floors in the halls, the bathrooms and bedrooms were worn and torn. Some of the areas had been patched with packing tape. Interview with Staff revealed that they had a contract to replace the flooring. Provide documentation of the completed repairs in the form of photos or receipts.	C 148	my floors will be completed by 7-12-17 if not before in June I have a contract with CMC Flooring. Since it is so much its going to be broken down in 3 phases once complete I will send photos of completion.	7-12-17	

3-31-17

To Whomever this may concern:

I Cora Wilson SIC of C+M Adult Care Home is requesting a waiver or more time for my correction to be complete on my floors due to it being broken down into different phases cause of the cast. I would very much appreciate it if you could extend my time to 7-12-17 but I'm hoping it should really be complete around the second week in June.

Respectfully
Cora Wilson

FCL-001-089

Contact number # 336-227-5216

or 336-269-1926