STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL001047	A. BUILDING: 01 B. WING	03/14/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BETHANY TENDER LOVE AND CARE	532 GREENWOOD DRIVE BURLINGTON, NC 27215

(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 Suzanna Fay DHSR Construction Section conducted a Biennial Survey on March 14, 2017 from 11:50 AM to 12:55 PM at the above referenced facility. DHSR records indicate the home was first licensed on March 3, 1994 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 1992 Family Care Homes Rules T10: 42C, applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 (1994 Revision) North Carolina State Building Code - Section 514.1, 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 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Review of records revealed that the last fire inspection was conducted on February 11, 2016. Therefore the facility is due for an annual inspection. Contact the local Fire Marshal to schedule an inspection. The last Sanitation Inspection report available at the facility was	C 117	C 117 HAS BEEN completed.	4/1/17

Division of Health Service Regulation

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C 117	Continued From page 1 conducted in November of 2014. Contact Environmental Health to schedule an inspection. Provide copies of the reports to DHSR/Construction Section.	C 117		
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. Observations revealed that the fire extinguishers were last inspected in February of 2016 and are due for their annual inspections. Contact the vendor to have the extinguishers inspected. Provide documentation of the repairs in the form of photos or receipts. 2. Observations revealed two unsecured oxygen tanks in Bedroom #1. Have the vendor provide storage units to secure the tanks so that they cannot tip or fall over. Provide documentation of the repairs in the form of photos or receipts. 3. Observations revealed that the electrical outlet at the sink of the bathroom off of Bedroom #3 did not have a cover plate. Install a cover plate. Provide documentation of the repairs in the form of photos or receipts. 4. Observations revealed that the light fixture in the bathroom off of Bedroom #3 had a non-GFCI	C 174	C 174 will completed by 4/30/17	

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C 174	Continued From page 2 outlet located on the side of the fixture. At this time, the light fixture did not have power. Plug or cap the outlet so that it is not used. Provide documentation of the repairs in the form of photos or receipts. 5. Observations revealed that the light cover was missing for the shower light in the bathroom off of Bedroom #3. Have a qualified technician install a light cover to protect the fixture from moisture. Provide documentation of the repairs in the form of photos or receipts. 6. Observations revealed that the right hand rail at the front ramp was separating at the post, making the rail unstable. Have a qualified technician repair the rail. Provide documentation of the repairs in the form of photos or receipts. 7. Observations revealed that the accent paint on the gutters and downspouts at the front and right sides of the facility was flaking and peeling. Have a qualified technician scrape and paint the gutters and downspouts as well as any other damaged finishes. Provide documentation of the repairs in the form of photos or receipts. 8. Observations revealed that the paint finish on the exterior shutters was flaking and peeling. Have a qualified technician scrape and paint the shutters. Provide documentation of the repairs in the form of photos or receipts. 9. Observations revealed that the fascia trim had rotted and fallen off of the attached storage unit outside of Bedroom #3. Have a qualified technician repair the exterior trim on the storage room. Provide documentation of the repairs in the form of photos or receipts.	C 174	C 174 will be Completed by	4/30/17

Lisa Rogers 4/17/17

ATT MS. FAY

PRINTED: 03/21/2017
FORM APPROVED

Division of Health Service Regulation

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C 104	Continued From page 3	C 104		
C 104	Construction-Attic T10: 42C .2102 CONSTRUCTION (d) The attic is not to be used for storage or sleeping. This Rule is not met as evidenced by: 1. Observations revealed Christmas decorations stored in the attic. Remove the stored items. Provide documentation of the repairs in the form of photos.	C 104	ITEMS will be removed 4/30/17	
C 138	Outside Entrances/Exits-Single Hand Motion T10: 42C .2209 OUTSIDE ENTRANCES AND EXITS (d) All exit doors locks must be easily operable, by a single hand motion, from the inside at all times without keys. This Rule is not met as evidenced by: 1. Observations revealed that the hardware on the exit door from the den was not single action hardware. Have a qualified technician replace the door hardware with single action hardware. Provide documentation of the repairs in the form of receipts or work orders.	C 138	Out ENTRANCES AND EXITS Repair by 4/30/17 HARDWARE ON THE EXIT DOOR FROM DEN WILL BE FIXED BY 4/30/17	
C 139	Outside Entrances/Exits-Free of Obstructions T10: 42C .2209 OUTSIDE ENTRANCES AND EXITS	C 139		

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C 139	Continued From page 4 (e) All entrances/exits must 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. Observations revealed that there was exercise equipment, scales and other items partially blocking the front entrance. Remove the items to maintain clearance in front of the exit. Provide documentation of the repairs in the form of photos.	C 139		
C 143	Floors T10: 42C .2211 FLOORS (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 a soft spot in the flooring of Bedroom #3 outside the bathroom. The floor had a patch, but the area where the patch was located was soft and spongy. Have a qualified technician repair the floor as required to have a safe and solid walking surface. Provide documentation of the repairs in the form of receipts or work orders.	C 143	42 C will be finished 4/30/17 A B	