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 _____	**01/09/2020**

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 Curtis McLaughlin DHSR Construction Section conducted a Biennial Survey on January 09, 2020 from 9:35 AM to10:55 AM 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. NOTES: 1.) At the time of our visit, we cited deficiencies that require an acceptable plan of correction. All deficiencies listed were discussed with onsite staff during the exit interview. There were previous deficiencies that were not closed out from an open biennial survey, these deficiencies were brought forward from previous survey. 2.) Take actions to correct all listed deficiencies, once completed provide verification in the form of photos, receipts, invoices, etc. for all work performed.	C 000		

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C 000	Continued From page 1 The cited deficiencies 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. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that there were a few holes on the exterior of the wall. This is not compliant with the rule. Take actions to ensure compliance with the rule. (Brought forward from previous survey.) 2.) At the time of the survey, it was observed that gutters are not cleaned. This is not compliant with the rule. Take actions to ensure compliance with the rule. 3.) At the time of the survey, it was observed that the end of the ramp is not leveled to the sidewalk. This is not compliant with the rule. Take actions to ensure compliance with the rule. 4.) At the time of the survey, it was observed that the ramp is not leveled to the porch. This is not compliant with the rule. Take actions to ensure compliance with the rule. (Brought forward from previous survey.) 5.) At the time of the survey, it was observed that the exterior dryer vent is dirty. This is not	C 174		

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C 174	Continued From page 2 compliant with the rule. Take actions to ensure compliance with the rule. 6.) At the time of the survey, it was observed that the water was turned off and the water meter was locked. This is not compliant with the rule. Take actions to ensure compliance with the rule. 7.) At the time of the survey, it was observed that the exterior wood has rotten above the crawl space. This is not compliant with the rule. Take actions to ensure compliance with the rule. 8.) At the time of the survey, it was observed that the exterior window trim has rotten. This is not compliant with the rule. Take actions to ensure compliance with the rule. (Brought forward from previous survey.) 9.) At the time of the survey, it was observed that the door jamb in the laundry area has rotten. This is not compliant with the rule. Take actions to ensure compliance with the rule. 10.) At the time of the survey, it was observed that handrails on the left rear porch where the laundry area is located, do not protect the entire length of the steps. This is not compliant with the rule. Take actions to ensure compliance with the rule. (Brought forward from previous survey.) 11.) At the time of the survey, it was observed that the window in the office/staff would not open. This is not compliant with the rule. Take actions to ensure compliance with the rule.	C 174		

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C 174	Continued From page 3 12.)At the time of the survey, it was observed that the light fixture in Bedroom #3 is broken. This is not compliant with the rule. Take actions to ensure compliance with the rule. 13.)At the time of the survey, it was observed in Bedroom #3 the door does not latch. This is not compliant with the rule. Take actions to ensure compliance with the rule. 14.)At the time of the survey, it was observed in Bedroom #2 the door does not latch. This is not compliant with the rule. Take actions to ensure compliance with the rule. 15.)At the time of the survey, it was observed that the area behind the dryer is not sealed. This is not compliant with the rule. Take actions to ensure compliance with the rule. 16.)At the time of the survey, it was observed that the air filter is dirty. This is not compliant with the rule. Take actions to ensure compliance with the rule. 17.)At the time of the survey, it was observed that the smoke detector in Bedroom #4 need to be replaced. This is not compliant with the rule. Take actions to ensure compliance with the rule. 18.)At the time of the survey, it was observed that the Oxygen Tank in Bedroom #1 was not properly mounted to the Oxygen Machine. This is not compliant with the rule. Take actions to ensure compliance with the rule. (Brought forward from previous survey.) 19.)At the time of the survey, it was observed that	C 174		

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C 174	Continued From page 4 the kitchen counter receptacles were not GFCI protected. This is not compliant with the rule. Take actions to ensure compliance with the rule. 20.)At the time of the survey, it was observed that the Kitchen Sink was leaking. This is not compliant with the rule. Take actions to ensure compliance with the rule. 21.)At the time of the survey, it was observed that the Electrical Panel that is outside is not labeled. This is not compliant with the rule. Take actions to ensure compliance with the rule. 22.)At the time of the survey, it was observed that the bathroom #1 ventilation fan is dirty. This is not compliant with the rule. Take actions to ensure compliance with the rule. 23.)At the time of the survey, it was observed that the bathroom ventilation fan is not vented to the outside. This is not compliant with the rule. Take actions to ensure compliance with the rule. 24.)At the time of the survey, it was observed that there are several open junction boxes in the attic. This is not compliant with the rule. Take actions to ensure compliance with the rule. 25.)At the time of the survey, it was observed that the heat detector is not wired on a separate circuit and it is rated at 135 degrees. This is not compliant with the rule. Take actions to ensure compliance with the rule. 26.)At the time of the survey, it was observed that the fire extinguishers are not monitored monthly. This is not compliant with the rule. Take actions to ensure compliance with the rule.	C 174		

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C 174	Continued From page 5 27.)At the time of the survey, it was observed that there were no Fire Drill Logs. This is not compliant with the rule. Take actions to ensure compliance with the rule.	C 174		
C 116	Dining Room IV. The Building C. Physical Environment 2. Dining Room (10 NCAC 42C .2203) a. Homes licensed as of April 1, 1984 must have a dining room or area of at least 120 square feet. The dining room can be used for other appropriate activities during the day. b. When the dining area is used in combination with a kitchen, an area five feet wide must be allowed as work space in front of the kitchen work areas. The work space is not to be used as the dining area. c. The dining room must be ventilated with windows and well lighted. This Rule is not met as evidenced by: 1.) At the time of the survey, it was observed that the Dining Room is 87 square feet. This is not compliant with the rule. Take actions to ensure compliance with the rule.	C 116		