Division of Health Service Regulation

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 _____	R **11/07/2023**

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 Scott Greenwood DHSR Construction Section conducted a Biennial Follow-up Survey on November 07, 2023 from 10:00 AM to 10:20 AM at the above referenced facility. At the time of the survey not all deficiencies were corrected thefore further action is required.	{C 000}	STAFF IS PRACTICING DOING FIRE DRILLS. A PULL STATION WAS INSTALLED BY ALARM COMPANY FOR EASY ACCESS TO SET OFF ALARM. MONITORING OF FIRE DRILL COMPLIANCE IS BEING MONITORED BY L. RAY BI-WEEKLY.	01/31/2024
{C 105}	Initial Licensure-Meet NCSBC SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (a) Any building licensed for the first time as a family care home shall meet the applicable requirements of the North Carolina State Building Code. All new construction, additions and renovations to existing buildings shall meet the requirements of the North Carolina State Building Code for One and Two Family Dwellings and Residential Care Facilities if applicable. All applicable volumes of The North Carolina State Building Code, which is incorporated by reference, including all subsequent amendments, may be purchased from the Department of Insurance Engineering Division located at 322 Chapanoke Road, Suite 200, Raleigh, North Carolina 27603 at a cost of three hundred eighty dollars ($380.00). (b) Each home shall be planned, constructed, equipped and maintained to provide the services offered in the home. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that none of the residents responded and evacuated	{C 105}		

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{C 105}	Continued From page 1 when the smoke detectors were sounded. This is not compliant with the rule. Take the necessary steps to train the residents to respond and evacuate at anytime the detectors are sounded. * At the time of the follow up survey, one of the residents would not evacuate whelm the alarms were sounded, even with staff prompting. This constitutes a non-ambulatory resident. The resident has to be trained to respond and evacuate at anytime the alarms are sounded. If the resident will not respond, they will need to be discharged or the license will need to be changed and the home brought into compliance to meet non-ambulatory requirements. * At the time of the 2nd Follow Up Survey two live fire drills were performed. At the time three (3) of the six (6) residents were onsite. None of the residents responded or evacuated when the alarm was sounded. All residents remained in their bedrooms. This is not compliant with the rule. Take the necessary steps to train the residents to respond or evacuate at the sound of the smoke alarms and any resident that requires physical or verbal prompting and or assistance needs to be relocated to another facility to better accommodate their needs.	{C 105}		
{C 123}	Dining Room SECTION .0300 - THE BUILDING 10A NCAC 13G .0306 DINING ROOM (a) Family care homes licensed on or after April 1, 1984 shall have a dining room or area of at least 120 square feet. The dining room may be used for other activities during the day. (b) When the dining area is used in combination with a kitchen, an area five feet wide shall be allowed as work space in front of the kitchen work areas. The work space shall not be used as the	{C 123}	THIS HAS BEEN IDR TO DHHS. DECISION STILL PENDING.	12/27/2023

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{C 123}	Continued From page 2 dining area. (c) The dining room shall have operable windows and be lighted to provide 30 foot candles of light at floor level. This Rule is not met as evidenced by: 1. At the time of the survey it was observed that the dining room area provided only had approximately 90 square feet. This is not compliant with the rule. Take the necessary steps to provide the necessary 120 square feet for the dining room. * This deficiency was carried over from the previous survey.	{C 123}		