DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 05/31/2016 FORM APPROVED OMB NO. 0938-0391

NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 1770 LIBRINIAN ROAD 1770 LIBRINIAN	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING			(X3) DATE SURVEY COMPLETED	
NAME OF PROVIDER OR SUPPLIER HIGHLAND ACRES NURSING AND REHABILITATION CENTER (24) ID PROVIDER OR SUMMARY STATELARD OF DEFICIENCIES (EACH DEPTICIENCY MUST BE PRECIDED BY FULL RESULATIONY OR LSC IDENTIFYING INFORMATION) FOR INITIAL COMMENTS There were no deficiencies cited as a result of this complaint investigation survey of 4/28/2016. EVENT ID # DMLB11.			245245					
HIGHLAND ACRES NURSING AND REHABILITATION CENTER (X4) ID PREFEX TAG (X4) ID PREFEX TAG (X4) ID PREFEX TAG (X5) INITIAL COMMENTS There were no deficiencies cited as a result of this complaint investigation survey of 4/28/2016. EVENT ID # DMLB 11.	L.			B. WINO_	<u> </u>		04/28/2016	
HIGH-LAND ACRES NURSING AND REHABILITATION CENTER LUMBERTON, NC 28358	NAME OF PROVIDER OR SUPPLIER					JUE		
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		this complaint investi	gation survey of 4/28/2016.					
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE								

Electronically Signed

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued

FORM CMS-2567(02-99) Previous Versions Obsolete

program participation.

05/16/2016