

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL001002</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>06/05/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BURLINGTON CARE CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2201 BURCH BRIDGE ROAD BURLINGTON, NC 27217</b>
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(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}	<p>Initial Comments</p> <p>Biennial Follow-Up Construction Survey report by Frank Strickland and Chris Sluder conducted on 06/05/2019:</p> <p>Deficiencies have been cited and a new Plan of Correction is required.</p>	{C 000}		
C 189	<p>Building Equipment Maintained Safe, Operating</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by: 1-Based on observation, this facility has failed to maintain the fire safety doors in a safe and operating condition.</p> <p>NEW DEFICIENCY Findings on 06/05/2019: The door leading into the Laundry Room has a 1/2 " gap at the top of the door that would allow the passage of smoke and/or fire.</p> <p>2-Based on observation, this facility has failed to maintain the fire safety doors in a safe and operating condition.</p> <p>NEW DEFICIENCY Findings on 06/05/2019: The entry door for Room 6 has a loose top hinge</p>	C 189		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 189	<p>Continued From page 1</p> <p>that prevents the door from latching that would allow the passage of smoke and/or fire.</p> <p>3-Based on observation, this facility has failed to maintain the fire safety doors in a safe and operating condition.</p> <p><b>NEW DEFICIENCY</b> Findings on 06/05/2019: The entry door for the Bedroom across the hall from the Office has a Dresser blocking the door that would allow the passage of smoke and/or fire.</p> <p>4-Based on observation, this facility has failed to maintain the fire safety doors separating the lower level from the upper level in a safe and operating condition.</p> <p><b>NEW DEFICIENCY</b> Findings on 06/05/2019: The stairway door at the top of the stair has a 2"+ gap at the threshold that would allow the passage of smoke and/or fire.</p> <p>5-Based on observation, this facility has failed to maintain the electrical fixtures on the outside in a safe and operating condition.</p> <p><b>NEW DEFICIENCY</b> Findings on 06/05/2019: The outside light fixture has become unsecured from exterior brick wall at the back staircase and is hanging in place the power cable in a hazardous manner.</p>	C 189		