

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL019021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/26/2017
NAME OF PROVIDER OR SUPPLIER CHATHAM RIDGE ASSISTED LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 114 POLKS VILLAGE LANE CHAPEL HILL, NC 27517		
(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 of Construction Section Biennial Survey by Ed Miller and Suzanne Fay on April 26, 2017. Records indicate this facility was first licensed on April 14, 2015, for 91 beds including a Special Care Unit with 34 beds. The facility is required to meet the 2005 Rules for Adult Care Homes of Seven or More Beds; and the 2006 North Carolina State Building Code Section 409.1- Institutional Occupancy Group I-2) Unrestrained. Deficiencies were cited that require a Plan of Correction.	C 000		
C 155	Floors-Non-skid, in Good Repair SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (i) The requirements for floors are: (1) All floors shall be of smooth, non-skid material and so constructed as to be easily cleanable; (2) Scatter or throw rugs shall not be used; and (3) All floors shall be kept in good repair. This Rule is not met as evidenced by: 1. Based on observations, the facility has failed to maintain the floors smooth and in good repair. Findings on April 26, 2017: a. B Hall Living - a floor mounted electrical power outlet is missing its outlet cover.	C 155		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS	C 164		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 164	Continued From page 1 (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to maintain the building in an uncluttered, clean and orderly manner. Findings on April 26, 2017: a. D Hall Resident Laundry - the Exhaust fan and its radiation damper had an excessive accumulation of dust/lint.	C 164		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the Building plumbing equipment was not maintained in a safe manner by not have properly working or installed parts. This could affect all residents, staff, and visitors by not protecting them from falls or injury due to broken or missing parts. Findings on April 26, 2017: a. Bedroom D07 Bathroom - the wall mounted clean out cover is off and laying on the floor.	C 166		

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C 166	Continued From page 2 b. Bedroom B09 Bathroom - the commode had a loose side hand grip (grab bar).	C 166		
C 189	Building Equipment Maintained Safe, Operating 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. This Rule is not met as evidenced by: 1. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the openings in the smoke barriers did not close completely and latch to restrict smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on April 26, 2017: a. Smoke Barrier on A Hall - the back leaf, of the double-egress cross-corridor doors, hits the front leaf and did not close and latch into its frame when the fire alarm system released the doors. b. Smoke Barrier C Hall - the front leaf, of the double-egress cross-corridor doors, hits the frame and will not close and latch into its frame when the fire alarm system released the doors. c. Smoke Barrier C Hall - the back leaf, of the double-egress cross-corridor doors, did not latch into its frame when the fire alarm system released the doors. d. Smoke Barrier b Hall - the both leafs, of the	C 189		

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C 189	Continued From page 3 double-egress cross-corridor doors, did not close and latch into their frame when the fire alarm system released the doors. 2. Based on observation, the interior doors were not maintained in a safe and operating condition. Findings on April 26, 2017: a. A Hall Theater - the pair of corridor doors did not have latching hardware and the door closers had been removed. Doors that do not latch into their frame cannot be smoke tight. b. C Hall Gym - the pair of corridor doors did not have latching hardware and the door closers had been removed. Doors that do not latch into their frame cannot be smoke tight. c. B Hall Living - the pair of corridor doors did not have latching hardware and the door closers had been removed. Doors that do not latch into their frame cannot be smoke tight. d. A Hall Theater - the pair of corridor doors did not have latching hardware and the door closers had been removed. Doors that do not latch into their frame cannot be smoke tight. e. Bedroom D06 - the corridor door did not latch into its frame when closed. f. Bedroom C01 - the corridor door did not latch into its frame when closed. g. Bedroom B07 - the corridor door did not latch into its frame when closed. h. Dining - the right leaf, of the pair of corridor doors did not close and latch into its frame. 3. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, all to fire/smoke if not contained in Room or compartment of origin Findings on April 26, 2017: a. Dry Room in Bulk Laundry - there is a gap around a conduit not firestopped as it penetrates	C 189		

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C 189	Continued From page 4 the fire-resistance-rated ceiling assembly. b. Bedroom D07 Bathroom - there is a gap around the heat lamp fixture not firestopped as it penetrates the fire-resistance-rated ceiling assembly. 4. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on April 26, 2017: a. Bulk Laundry- the exhaust fan cover is falling down from the ceiling b. Dryer Room in Bulk Laundry - the electrical power receptacle had a broken cover plate. c. Bedroom D07 Bathroom- the recessed light fixture in the shower is falling down from the ceiling. d. Bedroom B02 Bathroom- the electrical power receptacle was not secured to the wall. 5. Based on observation, the Building was not maintained in a safe and operating condition, because the commercial kitchen hood's fire suppression system lacked the inspections, maintenance, and documentation required to ensure a properly working system. This could affect residents, staff and visitors if the commercial kitchen hood's suppression system fails to operate properly when needed. Findings on April 26, 2017: a. Kitchen -since the semi-annual maintenance of the commercial kitchen hood's fire suppression system in October 2016, there has been no documentation of the monthly inspections. 6. Based on observation, the Building Sprinkler System was not maintained in a safe and operating condition. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin.	C 189		

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C 189	Continued From page 5 Findings on April 26, 2017: a. Bedroom A01 Window Side Closet - the fire sprinkler escutcheon plate had dropped down from the fire-resistance-rated ceiling exposing an opening that allows the spread of smoke and heat. b. Bedroom C12 near Corridor Door - the fire sprinkler escutcheon plate was missing, exposing an opening through the fire-resistance-rated ceiling that allows the spread of smoke and heat. 7. Based on observation, the Building was not maintained in a safe and operating condition, by failing to ensure that egress from all areas can be done without the use of keys, tools or, special knowledge or effort. This could affect some staff and visitors if someone becomes trapped inside. Findings on April 26, 2017: a. Bedroom D05 Corridor Side Closet -the closet was locked from the outside with "the Door Guardian", a device that does not provide an override mechanism that allows exiting from the closet. b. Bedroom D07 Corridor Side Closet -the closet was locked from the outside with "the Door Guardian", a device that does not provide an override mechanism that allows exiting from the closet.	C 189		
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances.	C 191		

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C 191	Continued From page 6 (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on Observation, the facility failed to prevent the use of portable electric space heater(s) in an Adult Care Home. This could affect residents, staff, and visitors if heater was the ignition source of a fire. The danger increases if used by resident or combustible material were near. Findings on April 26, 2017: a. Wellness Director Office - a portable electric space heater was found in this room. Deficiency corrected before Construction Surveyors departed the site.	C 191		