STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL032091	A. BUILDING: **01** B. WING _____	**06/07/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DURHAM RIDGE ASSISTED LIVING	**3420 WAKE FOREST HWY** **DURHAM, NC 27703**

(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 a Construction Section Biennial Survey by Suzanna Fay and Frank Strickland conducted on June 7, 2017. Records indicate this facility was first licensed on February 14, 1991. The facility is currently licensed for 144 Special Care Beds. Therefore the facility was surveyed for conformance with the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, the 1991 Rules for Licensing of Adult Care Homes of Seven or More Beds in effect at the time of initial licensure and applicable portions of the 1991 Edition of the North Carolina Building Code, Institutional Occupancy.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation at no cost; This Rule is not met as evidenced by:	C 101		

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C 101	Continued From page 1 1. Observations revealed that the facility does not meet the code requirements in effect when the special locking arrangements were installed or altered. Findings on June 7, 2017: a. The manual key override switch at the cross corridor doors to the 400 Wing did not operate with the master key. The override switch had not been replaced or rekeyed to meet the new locking system when the facility converted to a full special care unit.	C 101		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. Review of records revealed that the facility did not have current sanitation inspection reports available for review. Findings on June 7, 2017: a. The current kitchen sanitation inspection was not available for review. b. The current building sanitation inspection was not available for review.	C 111		
C 150	Corridors-Free of equipment and Obstructions SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT	C 150		

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C 150	Continued From page 2 (g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions. This Rule is not met as evidenced by: 1. Observations revealed that the corridors were not maintained free of obstructions. This affects the safety of the Residents, Staff and Visitors. Findings on June 7, 2017: a. Physical Therapy equipment was being stored in the vestibule at the rear exit obstructing the path of egress. This equipment was removed at the time of the survey.	C 150		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (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. Observations revealed that the ceilings were not maintained in good repair. Findings on June 7, 2017: a. Corridor outside of Room 101 - the ceiling was spalling around the sprinkler head. b. Corridor outside of Room 314 - there is a 12" section where the ceiling finish has flaked off. c. Room 403 - the ceiling is stained from a previous leak and the finish is flaking.	C 164		

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C 164	Continued From page 3 2. Observations revealed that the floors were not maintained in good repair. Findings on June 7, 2017: a. Room 115 - the tiles around the toilet were stained, yellowed and dirty at the joints.. The seal around the baseboard was loose and the gaps had mildew stains. The walls and baseboards were spotted with stains. The room had an unpleasant odor. 3. Observations revealed that the walls were not maintained in good repair. Findings on June 7, 2017: a. Corridor outside of Room 220 - there are gaps in the wall around the nurse call light. b. Sprinkler Riser Room - there is a hole behind the pipes on the right wall as well as a damaged section to the left of the hole. 4. Observations revealed that the beds were not maintained in good repair. Findings on June 7, 2017: a. Room 208 - the front bed was not stable. The headboard was not secure and was leaning. 5. Observations revealed that the sink vanity tops were not maintained in good condition. Findings on June 7, 2017: a. Room 208 - the bracket supporting the sink is loose and no longer providing good support for the sink. b. Room 310 - the sink counter is not secure.	C 164		

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C 166	Continued From page 4	C 166		
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. Observations revealed that the facility was not maintained free of hazards. Findings on June 7, 2017: a. Room 403 - the bathroom door had a sliding lockset on the interior side of the door. The latch was removed on site. b. Main Electric Room - items were stored in front of the electrical panels creating a safety hazard.	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:	C 189		

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C 189	Continued From page 5 1. Observations revealed that the facility failed to maintain the fire safety equipment in a safe and operating condition. Corridor doors must close and latch to contain smoke. The residents could be exposed to fire and smoke it it spreads beyond the point of origin. Findings on June 7, 2017: a. Room 105 - the door has begun to sag and drags on the floor. b. Room 113 - the corridor door does not latch. c. Nurses' Station - the door frame is not secure causing the door to drag. d. Room 308 - the corridor door does not latch. e. Room 309 - the door hardware is loose. f. Room 315 - the door has dropped, causing it to drag on the floor. The door frame is not secure to the wall. g. Spa at 400 Hall - the door hardware is damaged. h. Storage Room (@ back exit) - the door has dropped and there is a gap at the top left, approximately 3/8" wide which would allow the transmission of smoke. 2. Based on observation there is a failure to maintain the facility's fire safety systems in a safe manner due to penetrations or gaps in the fire resistant rated ceilings. Penetrations, gaps or holes in fire resistant rated ceilings could effect the occupants of the facility by allowing fire and smoke to spread beyond the area of origin. Findings on June 7, 2017: a. Corridor outside of Room 114 - the finishing tape is separating and there is a 1/2 diameter hole in the ceiling near the smoke detector. b. Corridor outside of Room 115 - the tape at the joint is separating. c. Sprinkler Riser Room - the sheetrock tape has	C 189		

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C 189	Continued From page 6 peeled off at the joint near the right back corner. The seam is splitting open leaving an opening in the fire rated assembly. d. Exterior Electrical Room - there are two small holes in the ceiling near the back left corner. 3. Observations revealed that the plumbing equipment was not maintained in operating condition. Findings on June 7, 2017: a. Room 101 - the hot water was difficult to operate and the faucet had a steady drip. 4. Observations revealed that the electrical equipment was not maintained in a safe condition. Findings on June 7, 2017: a. Room 212 - the wall mounted light at the front bed was not secured to the wall. 5. Observations revealed that the fire protection equipment was not maintained in a safe and operating condition. Findings on June 7, 2017: a. 200 Hall - the escutcheon plate at the sprinkler head near the cross corridor doors has dropped leaving a gap between the head and the ceiling. b. Sprinkler Riser Room - there is a pipe penetrating the ceiling in the back left corner that is not fire caulked. 6. Observations revealed that the mechanical equipment was not maintained in a safe and operating condition. Findings on June 7, 2017: a. Beauty Salon - the vent has shifted leaving an	C 189		

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C 189	Continued From page 7 opening in the ceiling. b. Mechanical Closet at the back exit - the supply duct has split at the seam. c. Mechanical Closet at the back exit - the joint where the supply penetrates the ceiling does not have a flange to seal the opening. d. Mechanical Closet at the back exit - the sheetrock tape on the ceiling at the left side has peeled off. e. Room 403 - the exhaust fan is falling out of the ceiling. f. Storage Room across from the kitchen - the ceiling fan is not secure in the ceiling. g. Small exterior Air Conditioning Room - the duct at the wall penetration does not have a flange to seal the penetration. h. Supply Room in the central hall - the R/A grille is loose. Two of the four screws are missing. 7. Observations revealed that the exterior facade was not maintained in good condition. Findings on June 7, 2017: a. 300 Hall Exit - an 18" section of the exterior soffit has fallen out and the soffit at the peak is loose. b. Back Exit - the aluminum trim and soffit at the left corner of the porch roof is damaged. There is evidence of pests entering the soffit. c. Back Exit - a section of the exterior fascia trim has fallen off to the left of the exit at the top of the gable over the central wing.	C 189		
C 195	Hot Water System SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (d) The hot water system shall be of such size to	C 195		

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C 195	Continued From page 8 provide an adequate supply of hot water to the kitchen, bathrooms, laundry, housekeeping closets and soil utility room. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). (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. Observations revealed that the hot water temperature was not maintained between a minimum of 100 degrees F and a maximum of 116 degrees F. This affects the safety of the Residents in the 300 Hall. Findings on June 7, 2017: a. Room 310 - the water temperature at the time of this survey was 128 degrees Fahrenheit. The water temperature was adjusted and the hot water in the tank was run until being delivered at a safe temperature. The temperature reading at a later time was 114.6 degrees F. This item was corrected during the survey.	C 195		
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces:	C 199		

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C 199	Continued From page 9 (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (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. Observations revealed that the exhaust ventilation was not maintained to provide exhaust ventilation at at rate of two cubic feet per minute per square foot. Findings on June 7, 2017: a. There was a pattern of exhaust fans containing a build-up of dust. b. Staff Break Room - the exhaust fan was not working. c. Laundry Room - the exhaust fan was missing. Interview with Staff revealed that the fan had burned out and there was another fan on order. d. Guest bath - the exhaust fan is not working.	C 199		