

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL073003	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 02/21/2018
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NAME OF PROVIDER OR SUPPLIER CAMBRIDGE HILLS ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 5660 DURHAM ROAD ROXBORO, NC 27573
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C 000	<p>Initial Comments</p> <p>Report of Biennial Construction Survey by Dennis Harrell and Suzanna Fay on 2-21-2018.</p> <p>Records indicate this facility was first licensed on 5-27-1999. The facility is currently licensed for 120 Beds including a 40 Bed addition in 2003. Therefore the facility was surveyed for conformance with the applicable portions of the 2005 Rules for Licensing of Adult Care Homes of Seven or More Beds, applicable portions of the 1996 and 2002 (for the addition) Editions of the North Carolina Building Code(s), Institutional Occupancy, and the 1996 Minimum Standards and Regulations for Homes for the Aged in effect at time of initial licensure.</p>	C 000		
C 150	<p>Corridors-Free of equipment and Obstructions</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT</p> <p>(g) The requirements for corridors are: (4) Corridors shall be free of all equipment and other obstructions.</p> <p>This Rule is not met as evidenced by: Based on observation, the corridor was not maintained free of obstructions. At least 6 feet of clear width must be maintained in exit corridors. Finding includes: There was a chair placed in the 100 Hall corridor reducing the clear width to less than 5 feet.</p>	C 150		
C 166	<p>Housekeeping-Maintained Free of Hazards</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS</p>	C 166		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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C 166	<p>Continued From page 1</p> <p>(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.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: Several portable medical oxygen cylinders were stored in cardboard delivery boxes in room 212.</p> <p>2. Based on observation, the facility was not maintained in a safe condition because of improper storage too close to a fire sprinkler head. Storage that is not kept at least 18 inches below the sprinkler head could negate the ability of the fire sprinkler system to extinguish a fire. Findings include; Boxes and other items had been stacked to within 2 inches of the ceiling in the Activity Director's office.</p> <p>3. Based on observation, there was no documentation of a monthly in-house/owner's inspection in January of this year provided on the inspection tag at the range hood fire suppression system. Range hood fire suppression systems must receive an in-house/owner's inspection monthly and the inspections must be documented somewhere such as on the tag provided at the system pull.</p> <p>4. Based on observation, an extension cord was</p>	C 166		

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C 166	Continued From page 2 being used in place of permanent wiring to decorative trees in the interior courtyard. Extension cords are intended for temporary use only. Additionally, the cord was extended across a sidewalk, presenting a trip and fall hazard. 5. Based on observation, the automatic closing fire curtain between the kitchen and dining room was obstructed from being able to close fully by 2 storage containers placed in its path. Note; This deficiency was corrected during the survey.	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, corridor doors are prevented from closing quickly and latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include; a. One of the smoke barrier doors near room 206 did not latch when activated and closed by the fire alarm system. d. The door to room 107 does not fit the opening	C 189		

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C 189	<p>Continued From page 3</p> <p>properly to be resistant to the passage of smoke. e. The strike is loose at the top of the dining room door.</p> <p>2. Based on observation, not all corridor doors were equipped with the necessary hardware to resist the passage of fire and smoke. Findings include: b. The double doors to the North Living room are not provided with latching hardware. c. The double doors to the South Living room are not provided with latching hardware. At the time of survey, it was not determined if the facility was equipped with all of the necessary components to meet the exception.</p> <p>3. Based on observation the required one-hour fire rated separation required for 'Hazardous' / 'Incidental Use' areas had been compromised. Findings include: a. There was a vent, 14 inches by 14 inches, cut through the one hour wall separating the main electrical room from the adjacent former bathroom that now houses TV equipment. The electrical room has unprotected openings to the bulk laundry and was considered part of the space requiring fire rated separation for 'Hazardous'/'Incidental Use' areas.</p> <p>4. Based on observation, the battery powered emergency light in the corridor near room 304 would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff.</p> <p>5. Based on observation the required one-hour fire rated ceilings were compromised in locations because of a sprinkler escutcheon not tightly fitted to the ceiling. Sprinkler escutcheons that</p>	C 189		

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C 189	Continued From page 4 are not properly mounted present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Improperly mounted escutcheon was found in: Corridor near room 208	C 189		
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: (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: Based on observation the facility failed to maintain required exhaust in a working condition. Findings include; The exhaust provided was not working in the janitor closet on 300 Hall.	C 199		