

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15A115	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2020
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NAME OF PROVIDER OR SUPPLIER CARE ONE AT JACKSON ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 11 HISTORY LANE JACKSON, NJ 08527
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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
A 000	<p>Initial Comments</p> <p>Initial Comments: TYPE OF SURVEY: Renovation and Conversion survey from Long Term Care rooms to 35 Single Assisted Living Residential units (35 Assisted Living beds), which included inspection of the Residents laundry room, Nurse/ Medication room, Serving area/ Dining room. This inspection will increase the current 69 Licensed beds up by 35 Licensed beds for a total of 104 Licensed Assisted Living beds.</p> <p>The facility is not in substantial compliance with all of the standards in the New Jersey Administrative Code 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs.</p>	A 000		
A1083	<p>8:36-16.1(b) Physical Plant</p> <p>(b) New buildings and alterations, renovations and additions to existing buildings for assisted living residences shall conform with the New Jersey Uniform Construction Code, N.J.A.C. 5:23-3, Use Group I-2 of the subcode.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and interview on 10/22/2020 in the presence of Facility Management it was determined that the facility failed To provide the emergency generator's annunciator panel in a location that</p>	A1083		

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

TITLE

(X6) DATE

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A1083	<p>Continued From page 1</p> <p>can be observed 24 hours a day by operating staff at a regular work station in accordance with the New Jersey Uniform Construction Code, NJAC 5:23, for use group I-2 (health care) occupancy.</p> <p>The evidence includes the following,</p> <p>On 10/22/2020 during the survey entrance at 9:03 a.m., the surveyor requested the facility's Executive Director (ED), Corporate Project Manager (CPM) and Maintenance & Environmental Supervisor (MES), "Does the facility have an emergency generator and where is the location of the emergency generator's annunciator panel." The MES said, Yes and the annunciator panel is in the Electrical room, downstairs.</p> <p>During the building tour at 12:39 p.m., the surveyor requested to go to the annunciator panel. At this time the MES said, let me go and get the CPM.</p> <p>At 12:50 p.m., both CPM and MES approached the surveyor in the dining room. The CPM placed the generator annunciator panel on the table and said it's not hooked up yet.</p> <p>Reference: 1) New Jersey Uniform Code 5:23 emergency power Chapter 27 Electrical Section 2702 emergency and standby power systems, 2702.1 Installation. Emergency and standby power systems shall be installed in accordance with ICC Electrical Code, NFPA 110 and NFPA 111. A remote annunciator that is storage battery powered shall be provided to operate outside of the generating room in a location readily observed by operating personnel at a regular work station.</p>	A1083		