

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/13/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315305	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/23/2019
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NAME OF PROVIDER OR SUPPLIER AMBOY CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1 LINDBERG AVENUE PERTH AMBOY, NJ 08861
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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) COMPLETION DATE
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E 000	Initial Comments This facility is in substantial compliance with Appendix Z-Emergency Preparedness for All Provider and Supplier Types Interpretive Guidance 483.73, Requirements for Long Term Care (LTC) Facilities.	E 000		
K 000	INITIAL COMMENTS LIFE SAFETY CODE 101:2012 THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R.	K 000		
K 281 SS=E	Illumination of Means of Egress CFR(s): NFPA 101 Illumination of Means of Egress Illumination of means of egress, including exit discharge, is arranged in accordance with 7.8 and shall be either continuously in operation or capable of automatic operation without manual intervention. 18.2.8, 19.2.8 This REQUIREMENT is not met as evidenced by: Based on observation and interview on 05/17/19, it was determined that the facility failed to ensure that exit discharge areas were provided with lighting as evidenced by the following: Discharge areas equipped with at least 2 sources of lighting provides the facility with back-up lighting in the event one should fail. This ensures that the area is not left in darkness thus, hindering residents and staff from safely evacuating the building in an emergency.	K 281	K-281 1. The single source of light and the light fixture with the single bulb unit located at the exit discharge area located outside room # [REDACTED] and room # [REDACTED] was replaced with two sources of light. 2. All residents, staff members and visitors have the potential to be affected when an exit area can not be seen during an emergency evacuation. All other exit	7/3/19

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 06/21/2019
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Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 281	<p>Continued From page 1</p> <p>An exterior tour of the building, in the presence of the facility's Maintenance Director, revealed that exit discharge areas in two locations were not equipped with at least two sources of lighting.</p> <p>At 11:15 a.m., the surveyor observed the exit discharge area, located outside of the [REDACTED] exit by resident room [REDACTED], was only equipped with one light fixture. During the observation, the facility's Maintenance Director acknowledged in an interview that this was the only source of light and, the light fixture was a single bulb unit.</p> <p>At 11:35 a.m., the surveyor observed the exit discharge area for the [REDACTED] exit by resident room # [REDACTED] was the same as the other. Again, the Maintenance Director acknowledge that the area was provided with only one source of light and the light fixture was a single bulb unit.</p> <p>The surveyor presented the findings to the Administrator on the same day at 1:00 p.m.</p> <p>N.J.A.C. 8:39-31.2(e)</p>	K 281	<p>signs were checked and bulbs were replaced as needed.</p> <p>3. An in-service was done with the Director of Maintenance in regards to the importance of two sources of light at exit areas.</p> <p>4. The Director of Maintenance will continue to ensure that all exit areas will be illuminated with 2 sources of light on an weekly ongoing. All findings will be reviewed at the Quality Assurance meeting x 2 quarters.</p>		