

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

PRINTED: 04/12/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345166	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/22/2016
NAME OF PROVIDER OR SUPPLIER STOKES COUNTY NURSING HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 1570 NC 8 AND 89 HIGHWAY DANBURY, NC 27016	
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K 000	INITIAL COMMENTS This Life Safety Code(LSC) survey was conducted as per The Code of Federal Register at 42CFR 483.70(a); using the 2000 Existing Health Care section of the LSC and its referenced publications. This building is Type II(222) construction, two story, with a complete automatic sprinkler system. In the exit conference all deficiencies noted were discussed and acknowledged with administration. At time of survey the licensed bed capacity = 40 NF Total Certified Bed Count 40 NF Census 40 NF	K 000		
K 012 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Building construction type and height meets one of the following: 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1 This STANDARD is not met as evidenced by: 42 CFR 483.70 (a) Based on observations, on June 22, 2016 at approximately 11:30 AM onward, the following deficiencies were noted: The standard is non-compliant, specific findings include: There are holes in the rated floor/ceiling assembly behind first floor nurse's station - located in ice machine room. NFPA 101, 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1 This deficiency potentially affects all smoke	K 012	Corrective action plan to be accomplished by the facility to correct the deficient practice: Maintenance staff replaced the ceiling tiles in the rated floor/ceiling assembly behind the first floor nurses station- located in the ice machine room. How will other life safety issues having potential to affect residents by the same deficient practice be identified: Maintenance staff inspected the	7/6/16

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

TITLE

(X6) DATE

Electronically Signed

07/10/2016

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 012	Continued From page 1 compartments. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.	K 012	<p>remaining floor/ceiling assembly for the unit and no additional holes were identified.</p> <p>Maintenance staff will inspect all floor/ceiling assembly for the unit for holes and replace as needed on a monthly basis.</p> <p>Measures to be put in place or systemic changes made to ensure that deficient practice will not occur:</p> <p>Maintenance staff inspected the remaining floor/ceiling assembly for the unit and no additional holes were identified.</p> <p>Maintenance staff will inspect all floor/ceiling assembly for the unit for holes and replace as needed on a monthly basis.</p> <p>Checking the floor/ceiling assembly for the unit will be completed per the monthly maintenance checklist.</p> <p>How will the facility monitor performance to make sure that solutions are sustained:</p> <p>Maintenance director will add checking and repair of the floor/ceiling assembly for holes to the monthly safety rounds of maintenance and repairs. Any holes or needed repair will be corrected when it is noted on inspection. This will be completed monthly for one year and longer if indicated.</p>	

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K 012	Continued From page 2	K 012	All findings will be reported on safety survey monthly and in quarterly Environment of care and monthly Housewide QI meeting.	
K 144 SS=E	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110)</p> <p>This STANDARD is not met as evidenced by: 42 CFR 483.70 (a)</p> <p>Based on observations, on June 22, 2016 at approximately 11:30 AM onward, the following deficiencies were noted: The standard is non-compliant, specific findings include:</p> <ol style="list-style-type: none"> 1. Visual indicator for normal power is not functioning on automatic transfer switch CMA - located in main electrical/mechanical room. 2. There are no documents confirming test of emergency power system in accordance with NFPA 110 Chapter 6. The documented monthly loads are less than thirty percent of combined generator nameplate ratings(800KW); the documents to not confirm compliance with alternative allowances permitted by referenced standard. 3. There are no specific gravity and electrolyte checks in accordance with NFPA 110 - available documents did not show specific gravity gravity reading for battery cells; and did not document electrolyte levels in accordance with manufacturer's specifications. 	K 144	<p>Corrective action plan to be accomplished by the facility to correct the deficient practice:</p> <p>Item 1- Maintenance director repaired the visual indicator for normal power on the automatic transfer switch CMA- located in the main electrical/mechanical room on 7-5-16.</p> <p>Item 2- The weekly internal testing and monthly on site testing had been completed and documented but not all components were included. The testing of emergency power system in accordance with NFPA 110 Chapter 6 had not been completed by an outside vendor with capability to complete this test. The test has been scheduled with Carolina Generator for August 1, 2016.</p> <p>Item 3- Generator battery cell tester was purchased with weekly testing and documentation of specific gravity and electrolyte levels on 7-1-2016.</p>	8/1/16

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K 144	Continued From page 3 NFPA 99, 3-4.4.1. NFPA 110 Chapter 6 This deficiency potentially affects all smoke compartments. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.	K 144	How will other life safety issues having potential to affect residents by the same deficient practice be identified: Item 1- Maintenance director repaired the visual indicator for normal power on the automatic transfer switch CMA- located in the main electrical/mechanical room on 7-5-16. Inspection will be completed weekly to verify visual indicator is working. Item 2- The weekly internal testing and monthly on site testing had been completed and documented but not all components were included. Due to the monthly loads being less than thirty percent of combined generator nameplate ratings, outside load bank testing is required. The testing of emergency power system in accordance with NFPA 110 Chapter 6 had not been completed by an outside vendor with capability to complete this test. The test has been scheduled with Carolina Generator for August 1, 2016. This outside testing will be scheduled and completed annually as required. Item 3- Generator battery cell tester was purchased with weekly testing and documentation of specific gravity and electrolyte levels started on 7-1-2016. This testing has been added to the weekly checklist for completion and documentation. Measures to be put in place or systemic changes made to ensure that deficient practice will not occur:		

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K 144	Continued From page 4	K 144	<p>Item 1- Maintenance director repaired the visual indicator for normal power on the automatic transfer switch CMA- located in the main electrical/mechanical room on 7-5-16. Inspection will be completed weekly to verify visual indicator is working.</p> <p>Item 2- The weekly internal testing and monthly on site testing had been completed and documented but not all components were included. Due to the monthly loads being less than thirty percent of combined generator nameplate ratings, outside load bank testing is required. The testing of emergency power system in accordance with NFPA 110 Chapter 6 had not been completed by an outside vendor with capability to complete this test. The test has been scheduled with Carolina Generator for August 1, 2016. This outside testing will be scheduled and completed annually as required.</p> <p>Item 3- Generator battery cell tester was purchased with weekly testing and documentation of specific gravity and electrolyte levels started on 7-1-2016. This testing has been added to the weekly checklist for completion and documentation.</p> <p>How will the facility monitor performance to make sure that solutions are sustained:</p> <p>Maintenance director will add weekly, monthly and annual checks and testing to routine checklists. These tests will be</p>		

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K 144	Continued From page 5	K 144	completed and documented by maintenance staff and reported monthly for one year and longer if indicated. Failure to complete all testing will be addressed and corrected immediately. All testing and completed checklists will be provided to the Quality of Life and Housewide QI meeting monthly.		
K 145 SS=E	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>The Type I EES is divided into the critical branch, life safety branch and the emergency system and Type II EES is divided into the emergency and critical systems in accordance with 3-4.2.2.2, 3-5.2.2 (NFPA 99)</p> <p>This STANDARD is not met as evidenced by: 42 CFR 483.70 (a)</p> <p>Based on observations, on June 22, 2016 at approximately 11:30 AM onward, the following deficiencies were noted: The standard is non-compliant, specific findings include:</p> <ol style="list-style-type: none"> 1. The fire control panel is connected to the normal power distribution panel instead of the Life Safety Branch system of the essential electrical system. 2. The generator annunciator panel is not reading EPS supplying load during test of emergency power supply system. During loss of normal power to ATS(CMPA), the generator annunciator did not read connection of generator supplying load through transfer switch. <p>NFPA 99, 3-4.2.2.2, 3-5.2.2</p> <p>This deficiency potentially affects all smoke</p>	K 145	<p>Corrective action plan to be accomplished by the facility to correct the deficient practice:</p> <p>Maintenance director contacted electrical vendor, who will be on site to install a new electrical feed from the Life Safety generator to the fire alarm panel at the entrance. The generator annunciator panel will be connected to read the EPS supplying load during testing of the emergency power supply system. Upon completion, testing will be completed with loss of normal power to ensure the annunciator indicates the generator is supplying load through the transfer switch.</p> <p>How will other life safety issues having potential to affect residents by the same deficient practice be identified:</p> <p>Maintenance director contacted electrical</p>	7/14/16	

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K 145	Continued From page 6 compartments. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.	K 145	<p>vendor, who will be on site to install a new electrical feed from the Life Safety generator to the fire alarm panel at the entrance. The generator annunciator panel will be connected to read the EPS supplying load during testing of the emergency power supply system. Upon completion, testing will be completed with loss of normal power to ensure the annunciator indicates the generator is supplying load through the transfer switch.</p> <p>The maintenance director has reviewed all required weekly and monthly components from the NFPA guidelines for testing and inspection of the Life Safety generator and added all components to the checklist. These will be completed and documented at the appropriate weekly or monthly intervals.</p> <p>Measures to be put in place or systemic changes made to ensure that deficient practice will not occur:</p> <p>Maintenance director contacted electrical vendor, who will be on site to install a new electrical feed from the Life Safety generator to the fire alarm panel at the entrance. The generator annunciator panel will be connected to read the EPS supplying load during testing of the emergency power supply system. Upon completion, testing will be completed with loss of normal power to ensure the annunciator indicates the generator is supplying load through the transfer switch.</p> <p>The maintenance director has reviewed</p>		

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K 145	Continued From page 7	K 145	<p>all required weekly and monthly components from the NFPA guidelines for testing and inspection of the Life Safety generator and added all components to the checklist. These will be completed and documented at the appropriate weekly or monthly intervals.</p> <p>Maintenance director will verify that the new electrical feed and annunciator are working properly upon installation on July 14, 2016.</p> <p>The maintenance staff will test and document monthly load testing and that the generator annunciator indicates the generator is supplying load through the transfer switch.</p> <p>How will the facility monitor performance to make sure that solutions are sustained:</p> <p>The maintenance staff will test and document monthly load testing and that the generator annunciator indicates the generator is supplying load through the transfer switch. This will be completed and documented on checklists and reported monthly for one year and longer if indicated.</p> <p>All findings will be reported monthly to the Safety committee and Housewide QI meeting.</p>		