STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255343	A. BUILDING **01** B. WING _____	**05/21/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BEDFORD CARE CENTER OF PICAYUNE	**2797 COOPER ROAD** **PICAYUNE, MS 39466**

(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
E 000	Initial Comments *EMERGENCY PREPAREDNESS* Survey conducted on 5/20/24 reveals the above facility meets all applicable Federal, State and local emergency preparedness requirements.	E 000		
K 000	INITIAL COMMENTS 42 CFR 483.70(b) The facility must meet the applicable provisions of the 2012 (existing) Edition of the Life Safety Code (LSC) of the National Fire Protection Association (NFPA).	K 000		
K 341 SS=E	Fire Alarm System - Installation CFR(s): NFPA 101 Fire Alarm System - Installation A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. In areas not continuously occupied, detection is installed at each fire alarm control unit. In new occupancy, detection is also installed at notification appliance circuit power extenders, and supervising station transmitting equipment. Fire alarm system wiring or other transmission paths are monitored for integrity. 18.3.4.1, 19.3.4.1, 9.6, 9.6.1.8 This REQUIREMENT is not met as evidenced	K 341		7/9/24

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

Electronically Signed | 06/13/2024

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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	255343	A. BUILDING **01** B. WING _____	**05/21/2024**

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K 341	Continued From page 1 by: Based on observations, the facility failed to have a properly installed fire alarm control panel as per NFPA 101 section 9.6.6. The deficient practice affected 51 of 105 residents in the facility on the day of survey. Findings include: On 5/21/24 at 2:30 PM, observation revealed the fire alarm system lacked a remote annunciator panel wasn ' t located in a constantly monitored location in Building A of the facility (ex. Nurses station or receptionist desk ...). The current fire alarm remote annunciator panel was in a closed, locked nurse office (not continued supervised area) in Building A of the facility	K 341	1. Fire enunciator was moved to a constantly monitored area on 6/12/24. 2. All residents in Building A have the potential to be affected by the deficient practice. 3. Maintenance supervisor will monitor the favility weekly for 12 weeks, then monthly, for Building A and Building B, to ensure we meet all requirements. 4. Monitoring results will be brought to the Quality Assurance and Assessment Committee for review on 7/9/24.	
K 916 SS=E	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Alarm Annunciator A remote annunciator that is storage battery powered is provided to operate outside of the generating room in a location readily observed by operating personnel. The annunciator is hard-wired to indicate alarm conditions of the emergency power source. A centralized computer system (e.g., building information system) is not to be substituted for the alarm annunciator. 6.4.1.1.17, 6.4.1.1.17.5 (NFPA 99) This REQUIREMENT is not met as evidenced by: Based on observations, the facility failed to	K 916	1. A generator enunciator will be installed	7/20/24

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	255343	A. BUILDING **01** B. WING _____	**05/21/2024**

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K 916	Continued From page 2 provide all the generator required components as in accordance with NFPA 110 section 5.6.6 and NFPA 99 section 6.4.1.1.17. The deficient practice affected 51 of 105 residents in the facility on the day of survey. Findings include: On 5/21/24 at 2:30 PM, observation revealed the generator lacked an operational, remote annunciator panel in a constantly monitored location in Building A of the facility (ex. Nurses station or receptionist desk ...). Observation also revealed Building A of the facility was connected to a rental generator without remote annunciator panel.	K 916	in a constantly monitored area. 2. All residents in Building A have the potential to be affected by this deficient practice. 3. Maintenance supervior will monitor the facility weekly for 12 weeks, then monthly for Building A and Building B to ensure we meet the requirements. 4. Monitoring results will be brought to the Quality Assurance and Assessment committee on 7/9/24.	