STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	25A402	A. BUILDING **01 - BUILDINGS 33** B. WING _____	**08/07/2024**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JNH-JEFFERSON INN	**3550 HWY 468 WEST** **WHITFIELD, MS 39193**

(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
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 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 properly protect all the generator required components as directed by NFPA 110 5.6.6 and NFPA 99 6.4.1.1.17. This deficiency affected 39 of the 78 residents in the facility on the day of survey. Findings Include: On 8/7/24 at 10:30 AM, observation revealed the nonfictional (nonworking) generator annunciator	K 916	1. What corrective action(s) will be accomplished for those residents found to have been affected by the deficient practice On 08/07/2024, the Fire Chief immediately notified the Maintenance Supervisor of the non-working remote annunciator. No residents required assessment. 2. How the facility will identify other residents having the potential to be affected by the same deficient practice. The facility has determined by the census that 39 residents had the potential to be	9/30/24

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

Electronically Signed | 08/21/2024

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	25A402	A. BUILDING **01 - BUILDINGS 33** B. WING _____	**08/07/2024**

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JNH-JEFFERSON INN	**3550 HWY 468 WEST** **WHITFIELD, MS 39193**

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K 916	Continued From page 1 on Building 33 of the facility. Interview revealed the maintenance person was unaware the nonfictional (nonworking) generator annunciator on Building 33.	K 916	affected. 3. What measures will be put into place or systemic changes made to ensure that the deficient practice will not recur. On 08/07/2024, the Fire Chief verbally counseled the Maintenance Supervisor on understanding the importance of having an operable remote annunciator to indicate alarm conditions of the emergency power source. Beginning 08/08/2024, the Maintenance Supervisor in-serviced the maintenance staff on the importance checking the remote annunciator to ensure they are working properly. Newly hired maintenance staff will be in-serviced upon hire, quarterly, and as needed by the Maintenance Supervisor on the importance of maintaining operable emergency equipment. 4. How the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a plan for ensuring that correction is achieved and sustained. This plan must be implemented, and the corrective action evaluated for its effectiveness. The plan of correction is integrated in to the quality assurance system. Beginning on 08/21/2024, the Maintenance Supervisor will monitor the maintenance staff to address the issues and understanding of importance of having an operable remote annunciator. Beginning 08/21/2024, the Maintenance staff will monitor the remote annunciator two (2) times a week for one month, then	

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K 916	Continued From page 2	K 916	one (1) time a month for one month using the Mississippi State Hospital MSH 1107B Lamp Test form to document any non-working issues. Any deficient practices will be corrected by the Maintenance Supervisor. Beginning 08/21/2024 the Nursing Home Administrator will review audit documentation weekly for 30 days. Beginning on 09/25/2024, the Nursing Home Administrator will report all audit findings to the Quality Assurance Performance Improvement (QAPI) committee monthly for two (2) quarters for action until consistent substantial compliance has been achieved as determined by the committee.	