MSDH - Health Facilities Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	66AG	A. BUILDING: **01 - MAIN BUILDING 01** B. WING _____	**03/05/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AZALEA GARDENS NURSING CENTER	**530 HALL ST** **WIGGINS, MS 39577**

(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
M1245	45.41.1 Date of Construction & Life Safety... Date of Construction and Life Safety Code Compliance. 1. Buildings constructed after the effective date of these regulations shall comply with the edition of the Life Safety Code (NFPA 101) effective on the date of construction. 2. Buildings constructed prior to the effective date of these regulations shall comply with Chapter 13 of the Life Safety Code (NFPA 101), 1985 edition. This Statute is not met as evidenced by: Based on observations, the facility failed to have properly installed fire alarm control panel and system as per NFPA 101 section 9.6.6. The deficient practice affected all 63 residents in the facility on the day of the survey. Findings include: On 3/5/25 at 11:00 AM, observation revealed the fire alarm system was renovated and upgraded with a new panel. The fire alarm system did not meet the current NFPA 72 guidelines. Observation also revealed pull stations that were too high from the finished floor and missing horn/strobe devices. The fire alarm panel is a major component of the fire alarm system, so all the other components such as pull stations, and horn strobes should have been upgraded.	M1245	1.On 3/5/2025, Southern Fire was contacted to address the situation of fire pull station not meeting ADA height requirement as indicated by NFPA 72 and the requirement for a strobe light to be installed on the therapy hall. 2.All residents had the potential to be affected. 3.Plan made with Southern Fire to come and correct the issue of installing a new pull station to meet ADA requirement as indicated by NFPA 72 and installing a strobe device on the therapy hall. Southern Fire will begin working on service orders for the pull station and the strobe light on 3/20/2025. 4.Maintenance Department will assess functionality and location of new pull station and strobe device upon installation. A fire drill will be conducted after installation to ensure all upgrades are integrated with the fire panel. Any issues will be reported immediately to the Administrator and will be reviewed by QA once monthly.	4/25/25

Mississippi State Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Electronically Signed		03/19/25

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M1245	Continued From page 1	M1245	Completion Date 4/25/2025	