

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

PRINTED: 10/13/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255191	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 09/13/2022
NAME OF PROVIDER OR SUPPLIER ATTALA COUNTY NURSING CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 326 HIGHWAY 12 WEST KOSCIUSKO, MS 39090		
(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(a) 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 353 SS=F	Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by: Based on the review of documentation, the facility failed to properly document records of testing the sprinkler system as required by NFPA 25 Table 2-1 and section 2-2.6. This deficient practice had potential of affecting the entire facility on the day of facility survey.	K 353			10/31/22
			*On 9-14-22 Southeastern Auto Sprinkler was contacted by Administrator for quarterly fire sprinkler system inspection of Attala County Nursing Center. The facility is due for annual sprinkler system inspection 10/14/22. Quarterly sprinkler system inspections will be		

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

TITLE

(X6) DATE

Electronically Signed

10/07/2022

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 353	Continued From page 1 Findings Include: On 9/13/22 at 1:30 PM, the facility could not produce the documentation for quarterly inspection of the fire sprinkler system for calendar years of 2021 and 2022. The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 7/19/22.	K 353	scheduled after 10/14/22 by Administrator. *This deficient practice had the potential to affect the entire facility. *The Maintenance Supervisor was in-serviced by the Administrator on 9-19-22 on ensuring the quarterly sprinkler system test is conducted to achieve compliance with the NFPA 25 Table 2-1 and section 2-26. *The Administrator and the Maintenance Supervisor will monitor its performance by creating a quarterly checklist that the Maintenance Supervisor will utilize to ensure the correction is achieved and sustained. This will be monitored quarterly for one quarter by the Administrator. The Quality Assurance Committee will address concerns from the performance monitoring quarterly.	10/31/22	
K 712 SS=F	Fire Drills CFR(s): NFPA 101 Fire Drills Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at expected and unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 19.7.1.4 through 19.7.1.7 This REQUIREMENT is not met as evidenced by: Based on record review and interviews, the	K 712	*An in-service was conducted with the		

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K 712	Continued From page 2 facility failed to properly perform fire drills as per NFPA 101 section 19.7.1.2. The deficient practice affected all smoke compartments and residents in facility on the day of survey. Findings Include: On 9/13/22 at 12:35 PM, the facility could not provide complete and proper documentation of fire drills. The following fire drill documentation information was not provided during the survey: No fire drill documentation for the 3rd shift during the 1st and 2nd quarters of 2022 No fire drill documentation for the 1st, 2nd, 3rd, and 4th quarters of 2021 The finding was acknowledged by the Administrator verified this observation during the exit interview on 9/13/22.	K 712	Maintenance Supervisor by the Administrator on 9-19-22 on properly performing fire drills as per NFPA 101 Section 19.7.1.2. A fire drill was conducted by Maintenance Supervisor on 9/18/22 on 7AM-3PM shift and 3PM-11PM shift. A fire drill was conducted on 9/30/22 by Maintenance Supervisor on 11PM-7AM shift. *The deficient practice affected all smoke compartments and residents in the facility. *A quarterly checklist of fire drills will be utilized by the Maintenance Supervisor to ensure the correction is achieved and sustained. *This will be monitored quarterly for one (1) quarter by the Administrator. The Quality Assurance Committee will address concerns from the performance monitoring quarterly.		
K 918 SS=F	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Maintenance and Testing The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a	K 918		10/31/22	

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K 918	Continued From page 3 process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110. Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked, readily identifiable, and separate from normal power circuits. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70) This REQUIREMENT is not met as evidenced by: Based on the review of documentation, the facility failed to properly document records of testing the generator annually as directed by NFPA 110 section 8.4.2, NFPA 99 sections 6.4.4.1.1.3 and 6.4.4.2. This deficient practice had potential of affecting the entire facility on the day of facility survey.	K 918	*An in-service was conducted with the Maintenance Supervisor by the Administrator on 9-19-22 on properly documenting records of testing the generator annually as directed by NFPA 110 Section 8.4.2 NFPA 99 Sections 6.4.4.1.1. and 6.4.4.2. The full load generator test was conducted by Maintenance Supervisor on		

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K 918	Continued From page 4 Findings include: On 9/13/22 at 12:35 PM, the facility could not produce the documentation for monthly 30-minute load test of the generator for the months October 2021, January 2022 to June 2022. The documentation provided by the showed the monthly load test were less 30 minute required time. The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 9/13/22.	K 918	10/1/22. *The deficient practice had potential of affecting the entire facility. *A monthly full load test of the generator will be documented by the Maintenance Supervisor in the Life Safety Binder. This load will test monthly to meet the required thirty (30) minute interval. *The Administrator will monitor the monthly load test by initializing the documentation in the Life Safety Binder. This will be monitored monthly for three (3) months. The Quality Assurance Committee will address concerns from the performance monitoring quarterly.		