STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255130	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**09/14/2022**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TIPPAH COUNTY NURSING HOME	**1005 CITY AVENUE NORTH** **RIPLEY, MS 38663**

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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 345 SS=F	Fire Alarm System - Testing and Maintenance CFR(s): NFPA 101 Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available. 9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72 This REQUIREMENT is not met as evidenced by: Based on record review, the facility failed to provide a properly maintained fire alarm system as required by NFPA 72 Table 14.3.1 and section 14.4.5.3.2. This deficiency affected the entire facility on day of survey. Findings include: On 9/14/22 1:40 PM, observation and testing revealed the audio/visual devices of fire alarm system did not function. All the exit doors did release for egress during the testing of the fire alarm system. Also, on 9/14/22 at 2:00 PM, an	K 345	1. On 9/14/2022, at 1400, Fire Watch was started with CNA monitoring fire alarm panel continuously. This was started due to strobes and horns not functioning properly when fire alarm panel was activated. CNAs regular assignment was reassigned to another CNA. Fire Watch CNA was instructed to have no other duties (including charting) at this time. Fire Watch CNAs only duty was to watch the fire alarm panel and observe for red light, which would indicate fire. If red light was noticed, she was to alert staff and call 911. If red light was noticed all staff was to monitor doors due to potential elopement, and evacuation was to begin, if warranted. During fire watch, no red	9/29/22

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

Electronically Signed | 09/30/2022

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K 345	Continued From page 1 interview the maintenance supervisor revealed fire alarm technician was called and a fire watch plan was started immediately. The maintenance supervisor was unaware of the malfunctioning audio/visual devices. The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 9/14/22.	K 345	lights were noticed. See Attachment regarding Fire Watch. Maintenance worker notified fire alarm technician immediately that our audio/visual devices of our fire alarm system were not functioning. Fire alarm technician arrived at facility on 9/14/2022 at 1530. Fire Watch CNA stepped away from panel while technician worked on panel. Administrator, Fire Watch CNA, and other staff were monitoring for fire during this time. Fire alarm technician fixed the audio/visual devices of our fire alarm system at 1725. Fire alarm technician tested alarm and audio/visual devices worked properly and this was witnessed by Administrator. See Attachment regarding Work Acknowledgment of Fire Alarm Panel. Administrator checked all exit doors after technician finished work and all exit doors were mag locked as required. Administrator allowed Fire Watch CNA to stop fire watch on 9/14/2022 at 1730. 2. All residents have the potential to be affected by the deficient practice. 3 a. Fire Alarm Panel policy was updated on 9/14/2022 to include if fire alarm panel isn□t working properly, a Fire Watch will be started immediately. This includes designating a specific person to ONLY watch panel for potential fire. They are to have NO OTHER DUTIES. It was also updated to include If the panel indicates a red light or the fire alarm panel alarms a fire, the staff will page CODE RED and CALL 911 immediately. It was also	

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K 345	Continued From page 2	K 345	updated to include the following related to the color lights of the fire alarm panel If all lights are green, then it□s good. If there are yellow/amber lights, notify maintenance. If there is a red light, page CODE RED, CALL 911, and notify maintenance. New policy was approved by Medical Staff on 9/27/2022. New policy was added to new hire orientation. See Attached Policy. b. Fire Drill policy was updated on 9/14/2022 to include we will set the full alarm system off. This will include horns and strobes. It was also updated to include During the drill, staff responsibilities (notifying 911 and what to do if system doesn□t alarm as required), evacuation routes, and exits will be discussed and documented. It was also updated to include If fire alarm system isn□t working as required, a Fire Watch will be started immediately and maintenance is to notify technician. New policy was approved by Medical Staff on 9/27/2022. New policy was added to new hire orientation. See Attached Policy. c. Corrective action for this deficiency is complete. It was completed on 9/29/2022. 4. The Administrator developed a Quality Improvement Monitor on 9/29/2022 to ensure Fire Drills are conducted every quarter on different shifts to include 7/3, 3/11, and 11/7 and that when these drills are completed that they include testing the audio/visual devices of our fire alarm system. If audio/visual devices are not functioning properly, technician will be	

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K 345	Continued From page 3	K 345	immediately notified and a fire watch will be started immediately. Compliance of the requirement will be monitored monthly times one year by Administrator. Administrator will add it to facility Quality scorecard. The Quality Assurance Committee will review results monthly to assure compliance or take corrective action, if applicable.	
K 711	Evacuation and Relocation Plan CFR(s): NFPA 101 Evacuation and Relocation Plan There is a written plan for the protection of all patients and for their evacuation in the event of an emergency. Employees are periodically instructed and kept informed with their duties under the plan, and a copy of the plan is readily available with telephone operator or with security. The plan addresses the basic response required of staff per 18/19.7.2.1.2 and provides for all of the fire safety plan components per 18/19.2.2. 18.7.1.1 through 18.7.1.3, 18.7.2.1.2, 18.7.2.2, 18.7.2.3, 19.7.1.1 through 19.7.1.3, 19.7.2.1.2, 19.7.2.2, 19.7.2.3 This REQUIREMENT is not met as evidenced by: Based on document review, the facility failed to properly update the fire plan in accordance with NFPA 101 sections 19.7.2.2., 19.7.1.1 through 19.7.1.3, 19.7.2.1.2, 19.7.2.2, 19.7.2.3. This deficiency affected all the residents in the facility at the time of survey. Findings Include:	K 711	1 a. On 9/14/2022, a note was taped to fire alarm panel by Administrator to remind staff to Call 911 if fire alarm sounds or red light is on. See Attached. On 9/14/2022, in-service was started by Administrator with staff to include the requirement to notify 911 if fire alarm sounds or red light is on. In-service also included proper evacuation/exits and proper procedures if fire was indicated.	9/30/22

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K 711	Continued From page 4 On 9/14/22 at 1:55 PM, document review fire plan revealed did not include or mention the facility staff manually calling the fire department when the fire alarm was activated or during fire emergency. A facility staff manually calling the fire department was the alternative since the fire alarm panel was not dialing to the fire department. The Administrator confirmed manual calling procedure had been left out of the training plan and had been conducted since 2018. The finding was acknowledged by the Administrator verified this observation during the exit interview on 9/14/22.	K 711	In-service continues with staff as they are scheduled. See Attached In-service. This in-service was also included in new hire orientation packet by Clinical Development Nurse to ensure that all new staff will be properly trained on these procedures. b. Two quotes have been obtained by Maintenance for a new fire alarm system that will connect to 911. CEO is following procedures to purchase new fire alarm system at this time. 2 All residents have the potential to be affected by the deficient practice. 3 a. The Fire Alarm Panel is located at the nursing home nurses station. Nursing Home staff are responsible for ensuring that 911 and maintenance are notified if there are red lights on the fire alarm panel or if fire alarm panel indicates a fire. In-service was completed with staff and is included in new hire orientation. b. Corrective action for this deficiency is complete. It was completed on 9/30/2022. 4 a. The Administrator developed a Quality Improvement Monitor on 9/29/2022 to ensure Fire Drills are conducted every quarter on different shifts to include 7/3, 3/11, and 11/7 and that when these drills are completed that they include discussing with staff what their responsibilities are, including notifying 911 when fire alarm panel sounds or red light is indicated on panel. Compliance will be monitored monthly times one year by	

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K 711	Continued From page 5	K 711	Administrator. The CEO will also follow procedures for getting a new fire alarm system ordered for facility that has capability to be monitored by 911. 4 b. The Administrator developed a Quality Improvement Monitor on 9/29/2022 to ensure that all new employees are educated on the requirement to notify 911 if fire alarm sounds or red light is on. Compliance will be monitored monthly times one year by Administrator. Administrator will add it to facility Quality scorecard. The Quality Assurance Committee will review results monthly to assure compliance or take corrective action, if applicable.	
K 916 SS=F	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 provide all the generator required components as accordance to NFPA 110 section 5.6.6 and NFPA 99 section 6.4.1.1.17. The deficient practice affected the entire facility on day of survey.	K 916	1 Generator Annunciator wiring was ordered on 9/22/2022. Annunciator was wired from existing generator on 9/26/2022. Annunciator Panel is at Tippah County Nursing Home□s nurses□ station at this time, however, the panel is	10/3/22

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K 916	Continued From page 6 Findings include: On 9/14/22 at 12:50 PM, observation revealed the generator lacked a complete remote annunciator panel in a constantly monitored location of the facility (ex. Nurses station or receptionist desk ...). The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 9/14/22.	K 916	not functioning properly. A new annunciator panel was ordered on 9/29/2022 and Cummins will be here to install new annunciator panel on 10/03/2022. 2 All residents have the potential to be affected by the deficient practice. 3 a. The Generator Annunciator Panel is located at the Tippah County Nursing Home□s nurses□ station. It has been wired from the existing generator. Panel is not fully functioning at this time, but Cummins will be here on 10/03/2022 to install new annunciator panel. When new annunciator panel is installed, staff will be in-serviced by Maintenance Supervisor on their responsibilities. In-service will also be added to new hire orientation. 3 b. The Emergency Generator policy was updated 9/27/2022 to include The annunciator panel, that is connected to generator, will be stationed at Health and Rehab nurses□ station and will be monitored by staff. If there are any problems with panel, staff is to notify maintenance immediately. Health and Rehab is synonymous with nursing home. New policy was approved by Medical Staff on 9/27/2022. New policy was added to new hire orientation by Clinical Development nurse. See Attached Policy. 3 c. The annunciator panel is not properly functioning. The new panel is expected to arrive on 10/03/2022 and Cummins is expected to be here on 10/03/2022 for installation. It is expected to be fully functioning on 10/03/2022. Compliance is	

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K 916	Continued From page 7	K 916	expected on 10/03/2022. 4 The Administrator developed a Quality Improvement Monitor on 9/29/2022 to ensure generator annunciator is installed and working properly. Compliance will be monitored weekly by Administrator until compliance is met. Once compliance is met, Administrator will monitor monthly times one year to ensure compliance continues. Administrator will add it to facility Quality scorecard. The Quality Assurance Committee will review results monthly to assure compliance or take corrective action, if applicable.	