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
	45CM	A. BUILDING: **01 - MAIN BUILDING 01** B. WING _____	**01/24/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MADISON CO NH	**1421-A EAST PEACE STREET CANTON, MS 39046**

(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 the review of documentation, the facility failed to properly document records of testing the generator annually as directed by NFPA 99 sections 6.4.4.1.1.3 and 6.4.4.2. This deficient practice had a potential of affecting the entire facility on the day of facility survey. Findings include: On 1/24/23 at 11:38 AM, the facility could not produce documentation of monthly load test for the generator during the year of 2022. The Maintenance Director was not aware of having to document the monthly load test. The finding was acknowledged by the Administrator and Maintenance Supervisor during the exit interview on 1/24/23.	M1245	A. The Maintenance Director conducted a load test on the generator on 1/24/23. No problems were noted. B. All residents had the potential to be affected by the deficient practice. C. The Administrator inserviced the Maintenance Supervisor on conducting monthly load tests and documenting the tests on 02/01/23. A load test was conducted on 02/07/23 and properly documented. D. The Administrator will inspect the documentation of the generator load tests monthly for a minimum of three months beginning 02/01/23 to ensure sustained compliance is achieved. Any findings will be reported to the Quality Assurance and Performance Improvement Committee beginning 02/21/23 for resolution.	2/21/23