STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255222	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**03/08/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRINITY HEALTHCARE CENTER	**230 AIRLINE ROAD** **COLUMBUS, MS 39702**

(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 372 SS=D	Subdivision of Building Spaces - Smoke Barrie CFR(s): NFPA 101 Subdivision of Building Spaces - Smoke Barrier Construction 2012 EXISTING Smoke barriers shall be constructed to a 1/2-hour fire resistance rating per 8.5. Smoke barriers shall be permitted to terminate at an atrium wall. Smoke dampers are not required in duct penetrations in fully ducted HVAC systems where an approved sprinkler system is installed for smoke compartments adjacent to the smoke barrier. 19.3.7.3, 8.6.7.1(1) Describe any mechanical smoke control system in REMARKS. This REQUIREMENT is not met as evidenced by: Based on the observation, the facility failed to provide half hour rating in the smoke barrier wall in accordance with NFPA 101 sections 19.3.7.3 and 8.5.6.2. This standard deficiency affected two (2) of three (3) smoke compartments in the facility on the day of Survey. Findings Include: On 3/8/23 at 10:30 AM, observation revealed unsealed holes around data cables at 200 Hall smoke barrier wall of the facility. The 200 Hall	K 372	1. On March 8, 2023, the smoke barrier at 200 hall was sealed. 2. All residents of Trinity Healthcare Center were found to potentially be affected by the deficient practice. 3. As future practice, any new change such as moving cable lines will be checked by Maintenance Personnel at the completion of the work to ensure that the smoke barrier wall has no unsealed penetration. Any penetration found will be sealed immediately. Director of	3/22/23

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

Electronically Signed | 03/24/2023

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255222	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**03/08/2023**

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TRINITY HEALTHCARE CENTER	**230 AIRLINE ROAD** **COLUMBUS, MS 39702**

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K 372	Continued From page 1 smoke barrier wall was incapable of resisting the passage of smoke throughout the facility. The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 3/8/23.	K 372	Maintenance checked smoke barrier walls throughout the building and found them to be sealed. 4. Director of Maintenance will add checking smoke barrier walls to his quarterly checklist to be completed in TELS. Results will be reported to QA Committee.	
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 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	K 918		4/20/23

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255222	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**03/08/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRINITY HEALTHCARE CENTER	**230 AIRLINE ROAD** **COLUMBUS, MS 39702**

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K 918	Continued From page 2 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 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. Findings include: On 3/8/23 at 11:30 AM, the facility could not produce documentation showing the current 2023 annual testing and service of the generator. The facility ' s last annual test of the generator was documented and performed January of 2022. The finding was acknowledged by the Administrator and Maintenance Supervisor during the exit interview on 3/8/23.	K 918	1. On March 22, 2023, Cummins Sales and Service requested scheduling of testing and service to the generator at Trinity Healthcare Center from their Birmingham site as soon as possible. Testing is scheduled for Tuesday, March 28, 2023. 2. All residents of Trinity Healthcare Center were found to potentially be affected by the deficient practice. 3.As future practice scheduling of annual testing and service will be planned in advance between the Director of Maintenance and Cummins Sales and Service. This is being added in the TELS system as due annually to be signed off no later than 12 months after last performed. 4. Director of Maintenance will monitor TELS for timely completion and report any service issues with generator to Quality Assurance Committee. Report of Annual Inspection will be presented to the Quality Assurance Committee on Wednesday, April 19, 2023, at the next scheduled meeting.	