STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255145	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**05/03/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COURTYARD REHABILITATION AND HEALTHCARE	**501 SOUTH LOCUST STREET** **MCCOMB, MS 39648**

(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 374 SS=F	Subdivision of Building Spaces - Smoke Barrie CFR(s): NFPA 101 Subdivision of Building Spaces - Smoke Barrier Doors 2012 EXISTING Doors in smoke barriers are 1-3/4-inch thick solid bonded wood-core doors or of construction that resists fire for 20 minutes. Nonrated protective plates of unlimited height are permitted. Doors are permitted to have fixed fire window assemblies per 8.5. Doors are self-closing or automatic-closing, do not require latching, and are not required to swing in the direction of egress travel. Door opening provides a minimum clear width of 32 inches for swinging or horizontal doors. 19.3.7.6, 19.3.7.8, 19.3.7.9 This REQUIREMENT is not met as evidenced by: Based on observations and testing, the facility failed to provide 20-minute fire resistance rating smoke barrier door in accordance with NFPA 101 sections 19.3.7.6, 19.3.7.8, 19.3.7.9. This standard deficiency affected three (3) of six (6) smoke compartments in the facility on the day of survey. On 5/3/23 at 12:30 PM, observation and testing revealed the following smoke barrier doors were incapable of closing upon activation of the fire	K 374	1) Root Cause Analysis was conducted by the Interdisciplinary Team (IDT) and based on findings the Regional Director of Plant Operations repaired the corridor smoke barrier doors between B & D Halls and replaced a corridor smoke barrier door between C & D Halls of the facility to ensure properly close upon activation of the Fire Alarm System on 05/25/2023.	6/2/23

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

Electronically Signed | 05/25/2023

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255145	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**05/03/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COURTYARD REHABILITATION AND HEALTHCARE	**501 SOUTH LOCUST STREET** **MCCOMB, MS 39648**

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K 374	Continued From page 1 alarm system: 1. Smoke barrier doors between B and D Halls of the facility 2. Smoke barrier doors between C and D Halls of the facility The finding was acknowledged by the Administrator and observed by the Maintenance Supervisor verified this observation during the exit interview on 5/3/23.	K 374	2) A quality review of corridor smoke barrier doors in the facility was conducted on 05/25/2023 by the Maintenance Director to ensure proper closing upon activation of the Fire Alarm System. Current residents have the potential to be affected. 3) The Executive Director(ED) educated the Maintenance Director and Maintenance Assistant on 05/23/2023 on the importance of NFPA 101 Subdivision of Building Spaces - Smoke Barrier Doors specific to maintaining corridor smoke barrier doors to ensure proper close upon activation of the Fire Alarm System. New hires will be educated in orientation. 4) The ED or Maintenance Director will monitor corridor smoke barrier doors to ensure proper closing upon activation of the Fire Alarm System 5 times per week for 2 weeks and then monthly for 2 months. Findings will be reported to the Quality Assurance Performance Improvement Committee (QAPI) Committee monthly starting 05/30/2023. Monitoring schedule will be revised based on findings.	