| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 255339 | A. BUILDING **01 - MAIN BUILDING 01**<br>B. WING _____ | **08/23/2023** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **CHOCTAW RESIDENTIAL CENTER** | **135 RESIDENTIAL CENTER RD**<br>**CHOCTAW, MS 39350** |

| (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<br><br>42 CFR 483.70 (a)<br><br>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<br>CFR(s): NFPA 101<br><br>Fire Alarm System - Testing and Maintenance<br>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.<br>9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72<br>This REQUIREMENT is not met as evidenced by:<br>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 the day of survey.<br><br>Findings include:<br><br>On 8/23/23 at 11:00 AM, observation and record review revealed the facility was unable to provide the current year (2023) documentation of annual and sensitivity inspection of the fire alarm system. The last annual inspection of the fire alarm system was done by B&E Communications Inc. on 4/5/22. | K 345 | A. The fire alarm system company was notified and they were at the facility on 8/28/2023 to inspect the system. Administrator spoke with service manager at the company and the company will put an alert into their system to automatically come to the facility prior to 8/28/2024 to inspect the fire alarm system.<br><br>B. All residents of the facility have the potential to be effected by this alleged deficient practice.<br><br>C. Am in service was held on 9/14/2023 with the Maintenance Director on the regulation that the fire alarm system has to inspected yearly. The Administrator will | 10/5/23 |

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

Electronically Signed | 09/18/2023

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 345 | Continued From page 1<br><br>The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 8/23/23. | K 345 | audit the Maintenance Director log prior to 8/28/2024 to ensure that the yearly inspection has been completed. The Maintenance Director will place into his log the date the repairs are done from the fire alarm inspection done on 8/28/2023 to ensure that needed repairs are completed.<br><br>D. The Maintenance Director will report to the Quality Assurance/Performance Committee on 10/5/2023 that all requirements have been met and all repairs are completed to ensure consistent substantial compliance has been met. | |
| K 353 SS=F | Sprinkler System - Maintenance and Testing<br>CFR(s): NFPA 101<br><br>Sprinkler System - Maintenance and Testing<br>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.<br>a) Date sprinkler system last checked<br>_____<br>b) Who provided system test<br>_____<br>c) Water system supply source<br>_____<br>Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system.<br>9.7.5, 9.7.7, 9.7.8, and NFPA 25 | K 353 | | 10/5/23 |

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| K 353 | Continued From page 2<br>This REQUIREMENT is not met as evidenced by:<br>Based on observations and record review, the facility failed to meet Standard for the Inspection, Testing and Maintenance of the Water-Based Fire Protection System as required by NFPA 101 chapters 9.7.5, 9.7.7, 9.7.8 and NFPA 25. The deficient practice had potential to affect the entire facility on the day of survey.<br><br>Findings Include:<br><br>On 8/23/23 at10:45 AM, observation and record review revealed the facility failed to provide the current annual inspection for the fire sprinkler system. The last annual inspection was done by American Fire Sprinkler Inc. on 5/11/22.<br><br>The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 8/23/23. | K 353 | A. The sprinkler system company was notified and they did a complete inspection on the Water Based Fire Protection System 9/12/2023 to ensure that the sprinkler system is in compliance with regulations.<br><br>B. It was determined that all residents of the facility could be effected by this alleged deficient practice.<br><br>C. An in service was held on 9/15/2023 with the Maintenance Director on the regulation of accurate and timely monitoring of our Water Based Fire Protection System. The Administrator will audit the Maintenance Directors log prior to 8/2024 to ensure that the facility has followed regulations of the sprinkler system testing.<br><br>D. The Maintenance Director will report the findings of the testing of the sprinkler system on 10/5/2023 to the Quality Performance/Improvement Committee meeting. the Administrator will follow up with the testing date prior to 9/2024 to ensure that consistent substantial compliance has been meet. | |