

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/05/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 255281	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/16/2023
NAME OF PROVIDER OR SUPPLIER LANDMARK OF DESOTO			STREET ADDRESS, CITY, STATE, ZIP CODE 3068 NAIL ROAD WEST HORN LAKE, MS 38637		
(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 911 SS=F	Electrical Systems - Other CFR(s): NFPA 101 Electrical Systems - Other List in the REMARKS section any NFPA 99 Chapter 6 Electrical Systems requirements that are not addressed by the provided K-Tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included on Form CMS-2567. Chapter 6 (NFPA 99) This REQUIREMENT is not met as evidenced by: Based on observation and testing, the facility failed to have a properly installed bypass isolation switch for the generator as required by NFPA 110 chapter 6.4.4 and annex B. This deficiency affected all 54 residents in the facility at the time of survey. Findings include: On 8/16/23 at 12:20 PM, observation and testing revealed the generator lacked a bypass isolation switch to allow the load to be connected to either power source. The Maintenance Supervisor was unable to test transfer power for the generator of	K 911	On 8/16/2023, the Administrator contacted an electrical contractor to obtained a time and date that a new bypass isolation switch could be installed properly. All residents have the potential to be affected by this deficient practice. On 8/17/2023, an in-service was conducted by the Administrator for all maintenance staff on the Life Safety Code for generators in Long Term Care facilities. The Maintenance Director contacted local Electrician Contractor on 09/11/23 for isolation switch installment	9/18/23	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

09/05/2023

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 911	Continued From page 1 the facility. The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 8/16/23.	K 911	Electrician completed an Emergency Automatic Transfer Verification of facility generator. The Electrician Contractor found that facility generator has no discrepancies in the operation of the automatic transfer switch.	9/18/23	
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			

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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 110 section 8.4.2. This deficiency affected all 54 residents in the facility on the day of the survey. Findings include: On 8/16/23 at 11:30 AM, the facility could not produce the documentation for monthly load test of the generator with the calendar years 2022 and 2023. The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 8/16/23.	K 918	On 8/16/2023, the facility recognized that documentation was not presented to the Life Safety Code surveyor for monthly generator load tests. All residents have the potential to be affected by this deficient practice. On 8/17/2023, an in-service was conducted by the Administrator for the Maintenance Director on the facility Generator Testing policy. The Administrator will monitor the completion of the generator log monthly by the Maintenance Director. This will begin on 8/20/2023 and continue for the next three months and then at each quarterly Quality Assurance (QA) committee meetings until substantial compliance is achieved. If any negative findings occur with current plan of correction, the QA committee will revise the plan of correction until compliance is obtained.		