

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345106</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING <b>02 - TRINITY RIDGE</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/28/2016</b>
NAME OF PROVIDER OR SUPPLIER  <b>TRINITY RIDGE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2140 MEDICAL PARK DRIVE HICKORY, NC 28602</b>	
(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  This Life Safety Code(LSC) survey was conducted as per The Code of Federal Register at 42CFR 483.70(a); using the 2000 New Health Care section of the LSC and its referenced publications. This building is Type II(222) construction, one story, with a complete automatic sprinkler system utilizing special locking. In the exit conference all deficiencies noted were discussed and acknowledged with administration.  At time of survey the licensed capacity = 120 NF Total Certified Bed Count = 120 NF Census = 115 NF  The deficiencies determined during the survey are as follows:	K 000		
K 144 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD  Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110) This STANDARD is not met as evidenced by: 42 CFR 483.70 (a)  Based on observations, on June 28, 2016 at approximately 8:30 AM onward, the following deficiencies were noted: The emergency generator was non-compliant, specific findings include:  1. Weekly electrolyte testing was not documented showing specific gravity readings for each cell of generator batteries and manufacturer's required levels for each cell.	K 144	1. Corrective action taken: Nathan Gilbert, Maintenance Director tested each cell of the generator batteries for required levels and document specific gravity readings. Date 6/28/16  2. For those having the potential to be affected: Nathan Gilbert, Maintenance Dir. or designee will be testing each battery cell weekly and documenting.	7/22/16

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

TITLE

(X6) DATE

Electronically Signed

07/22/2016

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.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345106</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING <b>02 - TRINITY RIDGE</b>  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>06/28/2016</b>
NAME OF PROVIDER OR SUPPLIER  <b>TRINITY RIDGE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2140 MEDICAL PARK DRIVE HICKORY, NC 28602</b>		
(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 144	<p>Continued From page 1</p> <p>NFPA 101, 9.1.2, 1999 NFPA 110 6-3.6 Storage batteries, including electrolyte levels, used in connection with Level 1 and Level 2 systems shall be inspected at intervals of not more than 7 days and shall be maintained in full compliance with manufacturer's specifications. Defective batteries shall be repaired or replaced immediately upon discovery of defects.</p> <p>Reference 1999 NFPA 110 A-6-3.6, NFPA 70, National Electrical Code, Section 700-4(c) Maintenance of batteries should include checking and recording the value of the specific gravity. NFPA 99 3-4.4.2 Record keeping. A written record of inspection, performance, exercising period, and repairs shall be regularly maintained and available for inspection by the authority having jurisdiction.</p> <p>This deficiency potentially affected all smoke compartments.</p> <p>Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.</p>	K 144	<p>3. Measures to ensure compliance: Nathan Gilbert Maintenance Dir. in serviced all maintenance staff about testing and documenting specific gravity readings for each cell of generator batteries. This is part of the preventative maintenance plan to ensure compliance. Dated 7/6/16</p> <p>4. To ensure solutions are sustained: Nathan Gilbert, Maintenance Dir. or designee will test and document specific gravity readings weekly to sustain compliance and will report monthly for 3 months to ensure compliance. Corrective action completed by 7/22/16</p>		