

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345184</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING <b>01 - MAIN BUILDING 01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/03/2016</b>
NAME OF PROVIDER OR SUPPLIER  <b>KINDRED TRANSITIONAL CARE &amp; REHAB-ELIZABETH CITY</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>901 SOUTH HALSTEAD BOULEVARD ELIZABETH CITY, NC 27909</b>	
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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 Existing Health Care section of the LSC and its referenced publications. This building is Type V (111) construction,one story, with a complete automatic sprinkler system and utilizing delayed egress system. In the exit conference all deficiencies noted were discussed and acknowledged with administration.  At time of survey the: Total Certified Bed Count =108 Census =79  The deficiencies determined during the survey are as follows:	K 000		
K 025 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD  Smoke barriers shall be constructed to provide at least a one half hour fire resistance rating and constructed in accordance with 8.3. Smoke barriers shall be permitted to terminate at an atrium wall. Windows shall be protected by fire-rated glazing or by wired glass panels and steel frames. 8.3, 19.3.7.3, 19.3.7.5 This STANDARD is not met as evidenced by: Based on observations, on Wednesday 8/3/2016 at approximately 8:00 AM onward, the following deficiencies were noted: The smoke walls are non-compliant, specific findings include:  1. The smoke wall, located on the front hall and lobby area and the 300 hall smoke wall have hole and/or penetration that were not sealed in order to maintain the required fire resistance rating of	K 025	1. Smoke barriers have been sealed.  2. Maintenance Director or Maintenance Assistant will make rounds in the facility to ensure all smoke barriers are constructed to provide at least a one half hour fire resistance rating and in accordance in NFPA 101 Life Safety Code Standard.	9/9/16

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

TITLE

(X6) DATE

Electronically Signed

08/24/2016

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.

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K 025	<p>Continued From page 1 the smoke barrier.</p> <p>Actual NFPA Standard: NFPA 101, 8.3.6.1. Pipes, conduits, bus ducts, cables, wires, air ducts, pneumatic tubes and ducts, and similar building service equipment that pass through floors and smoke barriers shall be protected as follows:</p> <p>1) The space between the penetrating item and the smoke barrier shall meet one of the following conditions:</p> <p>a. It shall be filled with a material that is capable of maintaining the smoke resistance of the smoke barrier.</p> <p>b. It shall be protected by an approved device that is designed for the specific purpose.</p> <p>2) Where the penetrating item uses a sleeve to penetrate the smoke barrier, the sleeve shall be solidly set in the smoke barrier, and the space between the item and the sleeve shall meet one of the following conditions:</p> <p>a. It shall be filled with a material that is capable of maintaining the smoke resistance of the smoke barrier.</p> <p>b. It shall be protected by an approved device that is designed for the specific purpose.</p> <p>3) Where designs take transmission of vibration into consideration, any vibration isolation shall meet one of the following conditions:</p> <p>a. It shall be made on either side of the smoke barrier.</p> <p>b. It shall be made by an approved device that is designed for the specific purpose.</p> <p>This deficiency affected four of six smoke compartments. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.</p>	K 025	<p>3. Maintenance Director or Maintenance Assistant will perform weekly audits for 4 weeks and monthly x 3 to ensure all smoke barriers comply with the minimum standards.</p> <p>4. Data results will be analyzed and reviewed at the centers monthly Quality Assurance and Performance Improvement meeting for 3 months with a subsequent plan of correction as needed.</p>	

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K 052 SS=D	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>A fire alarm system required for life safety shall be, tested, and maintained in accordance with NFPA 70 National Electric Code and NFPA 72 National Fire Alarm Code and records kept readily available. The system shall have an approved maintenance and testing program complying with applicable requirement of NFPA 70 and 72. 9.6.1.4, 9.6.1.7,</p> <p>This STANDARD is not met as evidenced by: Based on observations, on Wednesday 8/3/2016 at approximately 8:00 AM onward, the following deficiencies were noted: The Fire Alarm Control Panel (FACP) was non-compliant, specific findings include:</p> <p>1. Upon testing the Fire Alarm Control Panel (FACP) for loss of battery power the (FACP) did not provide a visual and/or audible signal at the panel.</p> <p>Standard: NFPA 101, 9.6.1.4. A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with the applicable requirements of NFPA 70, National Electrical Code, and NFPA 72, National Fire Alarm Code.</p> <p>This deficiency affected the entire facility. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.</p>	K 052	<p>1. The system was reprogrammed to pick up trouble code if the battery malfunctions.</p> <p>2. Maintenance Director or Maintenance Assistant will make rounds in the facility to ensure the Fire Alarm Control Panel (FACP) provides a visual and/or audible signal at the panel.</p> <p>3. Maintenance Director or Maintenance Assistant will perform weekly audits for 4 weeks and monthly x 3 to ensure the FACP is tested and maintained in accordance with the applicable requirements of NFPA 70, National Electrical Code, and NFPA 72, National Fire Alarm Code.</p> <p>4. Data results will be analyzed and reviewed at the centers monthly Quality Assurance and Performance Improvement meeting for 3 months with a subsequent plan of correction as needed.</p>	9/9/16
K 061 SS=D	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Automatic sprinkler system supervisory attachments are installed and monitored for integrity in accordance with NFPA 72, and provide</p>	K 061		9/9/16

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K 061	<p>Continued From page 3</p> <p>a signal that sounds and is displayed at a continuously attended location or approved remote facility when sprinkler operation is impaired. 9.7.2.1, NFPA 72</p> <p>This STANDARD is not met as evidenced by: Based on observations, on Wednesday 8/3/2016 at approximately 8:00 AM onward, the following deficiencies were noted: The automatic sprinkler system was non-compliant, specific findings include:</p> <p>1. The sprinkler tamper supervisory signal could be silenced permanently. Supervisory signals shall not be silenced permanently except by reopening/restoration of the valve.</p> <p>Reference NFPA 101, 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5 NFPA 13 "...distinctive supervisory signal shall be provided to indicate a condition that would impair the satisfactory operation of the sprinkler system." NFPA 9.7.2.1 "...supervisory attachments shall be installed and monitored for integrity in accordance with NFPA 72 AND a distinctive supervisory signal shall be provided to indicate a condition that would impair the satisfactory operation of the sprinkler system...Supervisory signals shall sound AND shall be displayed either at a location within the protected building that is constantly attended by qualified personnel or at an approved, remotely located receiving facility.</p> <p>This deficiency affected all smoke compartments. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.</p>	K 061	<p>1. The access level to the fire panel was changed so they could not be silenced without a code only maintained by the Maintenance Director or Simplex Grinnell.</p> <p>2. Maintenance Director or Maintenance Assistant will monitor the fire panel to ensure the automatic sprinkler system function is compliant in accordance with NFPA 72, and provides a signal that sounds and is displayed at a continuously attended location or approved remote facility when sprinkler operation is impaired.</p> <p>3. Maintenance Director or Maintenance Assistant will perform weekly testing of the fire panel and sprinkler system weekly x 4 weeks and monthly x 3 to ensure a distinctive supervisory signal shall be provided to indicate a condition that would impair the satisfactory operation of the sprinkler system.</p> <p>4. Data results will be analyzed and reviewed at the centers monthly Quality Assurance and Performance Improvement meeting for 3 months with a subsequent plan of correction as needed.</p>	
K 067	NFPA 101 LIFE SAFETY CODE STANDARD	K 067		9/9/16

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K 067 SS=E	<p>Continued From page 4</p> <p>Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2</p> <p>This STANDARD is not met as evidenced by: Based on observations, on Wednesday 8/3/2016 at approximately 8:00 AM onward, the following deficiencies were noted: The ....was non-compliant, specific findings include:</p> <p>1. An access door for the smoke duct detectors in the HVAC units located in the attic on Front hall and center nurse station area were not provided for in order to clean, inspect and maintain the device. NFPA 90A, 2-3.4.1</p> <p>This deficiency affected two of six smoke compartments. Failure to comply with minimum standards as referenced increases the risk of death or injury due to fire and/or smoke.</p>	K 067	<ol style="list-style-type: none"> <li>1. Access door panels installed.</li> <li>2. Maintenance Director or Maintenance Assistant will monitor the heating, ventilating, and air conditioning units in the attic to ensure the access doors provided entry for cleaning, inspecting and maintenance of the device.</li> <li>3. Maintenance Director or Maintenance Assistant will perform weekly audits for 4 weeks and monthly x 3 to ensure compliance is maintained to meet the minimum standards to decrease the risk of death or injury due to fire and/or smoke.</li> <li>4. Data results will be analyzed and reviewed at the centers monthly Quality Assurance and Performance Improvement meeting for 3 months with a subsequent plan of correction as needed.</li> </ol>		