

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

PRINTED: 01/31/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345164	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/06/2017
NAME OF PROVIDER OR SUPPLIER CHOWAN RIVER NURSING AND REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1341 PARADISE ROAD P O BOX 566 EDENTON, NC 27932	
(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 utilizing the 2012 edition of the National Fire Protection Association (NFPA) 101 - Life Safety Code (LSC) and 2012 edition of the NFPA 99 - Health Care Facilities Code (HCFC) and its referenced publications. The facility plan/construction approval occurred prior to July 5, 2016. The facility is utilizing special locking systems. In the exit conference all LSC deficiencies noted were discussed and acknowledged with Administration. Stories: one Construction Type: V (111) Constructed: plan approval 1977 Fully Sprinkled At time of survey the Licensed bed capacity = 150 Total Certified Bed Count =150 Census = 82	K 000		
K 321 SS=D	Hazardous Areas - Enclosure CFR(s): NFPA 101 Hazardous Areas - Enclosure Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with 3/4 hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1 or 19.3.5.9. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door. Describe the floor and zone locations of hazardous areas that are deficient in REMARKS.	K 321		12/18/17

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

TITLE

(X6) DATE

Electronically Signed

12/18/2017

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 321	<p>Continued From page 1 19.3.2.1, 19.3.5.9</p> <p>Area Automatic Sprinkler Separation N/A</p> <p>a. Boiler and Fuel-Fired Heater Rooms b. Laundries (larger than 100 square feet) c. Repair, Maintenance, and Paint Shops d. Soiled Linen Rooms (exceeding 64 gallons) e. Trash Collection Rooms (exceeding 64 gallons) f. Combustible Storage Rooms/Spaces (over 50 square feet) g. Laboratories (if classified as Severe Hazard - see K322)</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, staff interview, and/or documentation on 12/6/2017 at 10:00 AM onward the following deficiencies were noted: The standard is non-compliant, specific findings include:</p> <p>1. There was not a closure on the door to central supply. The room was over 50 square feet in size and storing quantities of combustible storage.</p> <p>Reference 2012 NFPA 101: 19: 3.2.1.3 The doors shall be self-closing or automatic closing.</p> <p>This deficiency affected one of six smoke compartments. Failure to comply with minimum standards as referenced increases the risk of death due to smoke and or fire.</p>	K 321	<p>K321</p> <p>A. The self-closer apparatus was placed on the inside top of the Central Supply room door on 12-11-17 by the Maintenance Director</p> <p>B 100% audit on all the doors that contain hazardous materials e.g. boiler/fuel-fired heater rooms, laundries larger than 100 square feet, repair, maintenance, and paint shops, soiled line rooms (exceeding 64 gals) trash collection rooms(exceeding 64 gallons, combustible storage rooms and laboratories rooms to ensue all hall self-closers on 12-11-2017.</p> <p>C Maintenance director was re-educated by the administrator on 12-14-2017 on the importance of having self-closures on all doors listed above.</p> <p>D. Maintenance will perform a weekly</p>		

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K 321	Continued From page 2	K 321	walk around the building to ensure all hazardous doors have self-closers and are in working order. E. The administrator will review the audits with the Quality Assurance committee for recommendations as incited x 3 months	
K 916 SS=F	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Alarm Annunciator A remote annunciator that is storage battery powered is provided to operate outside of the generating room in a location readily observed by operating personnel. The annunciator is hard-wired to indicate alarm conditions of the emergency power source. A centralized computer system (e.g., building information system) is not to be substituted for the alarm annunciator. 6.4.1.1.17, 6.4.1.1.17.5 (NFPA 99) This REQUIREMENT is not met as evidenced by: Based on observations, staff interview, and/or documentation on 12/6/2017 at 10:00 AM onward the following deficiencies were noted: The standard is non-compliant, specific findings include: 1. The remote emergency generator annunciator located at the nurses station did not show generator running when tested under load. The indicator light functioned properly when testing lamps on annunciator. Reference 2010 NFPA 99: 6.4.1.17, A remote annunciator that is storage battery powered shall	K 916	K916 A. The remote emergency generator annunciator located at the nurses station had a new light bulb place in it on 12-11-2017 by Western Branch so that it will show "generator running" under load. B. 100% audit was done of the rest of the lights in the remote generator annunciator located at the nurses' station when tested under load. C Maintenance will check the remote	12/18/17

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K 916	<p>Continued From page 3</p> <p>be provided to operate outside of the generating room in a location readily observed by operating personnel at a regular work station. The annunciator shall be hard wired to indicate alarm conditions of the emergency or auxiliary power source as follows:</p> <p>(1) Individual visual signals shall indicate the following:</p> <ul style="list-style-type: none"> a. When the emergency or auxiliary power source is operating to supply power to load b. When the battery charger is malfunctioning <p>(2) Individual visual signals plus a common audible signal to warn of an engine-generator alarm condition shall indicate the following:</p> <ul style="list-style-type: none"> a. Low lubricating oil pressure b. Low water temperature (below those required in 6.4.1.1.11) c. Excessive water temperature d. Low fuel when the main fuel storage tank contains less than a 4-hour operating supply e. Overcrank (failed to start) f. Overspeed <p>A remote, common audible alarm shall be provided as specified in 6.4.1.1.17.4 that is powered by the storage battery and located outside of the EPS service room at a work site observable by personnel.. [110: 5.6.6]</p> <p>This deficiency affected one of six smoke compartments. Failure to comply with minimum standards as referenced increases the risk of death due to smoke and or fire.</p>	K 916	<p>emergency enunciator located at the nurses state when under load weekly to ensure all lights including "generator running" are working properly</p> <p>D. Maintenance director was re-educated by the administrator on 12-14-2017 on the importance of all lights working on the remote emergency annunciator.</p> <p>E The administrator will review the audits with the Quality Assurance committee for recommendations as indicated X 3 months</p>		