

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

PRINTED: 11/15/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 106031	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 10/17/2018
NAME OF PROVIDER OR SUPPLIER VICTORIA NURSING & REHABILITATION CENTER, INC.			STREET ADDRESS, CITY, STATE, ZIP CODE 955 NW 3RD ST MIAMI, FL 33128		
(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	
E 000	Initial Comments An unannounced recertification survey was completed on October 17, 2018 at Victoria Nursing and Rehabilitation. The facility is in compliance with 42 CFR 483.73 Condition of Participation for Emergency Preparedness for long term care facilities.	E 000			

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

TITLE

(X6) DATE

Electronically Signed

11/12/2018

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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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 106031	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN FED B. WING _____	(X3) DATE SURVEY COMPLETED 10/17/2018
NAME OF PROVIDER OR SUPPLIER VICTORIA NURSING & REHABILITATION CENTER, INC.			STREET ADDRESS, CITY, STATE, ZIP CODE 955 NW 3RD ST MIAMI, FL 33128	
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K 000	<p>INITIAL COMMENTS</p> <p>An unannounced annual Federal Re-Certification Life Safety Survey was conducted on October 16 to 17, 2018 at Victoria Nursing and Rehabilitation Center (provider # 106031) located at 955 NW 3rd St., Miami, FL. 33128. Under the 42 CFR 483, requirements for Long Term Facilities, for compliance with National Fire Protection Association (NFPA) 101 (2012 Edition) known as the Life Safety Code and all of its applicable referenced publications. The Victoria Nursing and Rehabilitation Center occupies approximately 132,183 maintainable square feet, of an eight story building with leased space not included in this survey on the second floor and on the eighth floor, built in 1971 of type I(332) construction with 264 resident beds.</p> <p>The building is protected with an automatic sprinkler system with a monitored fire alarm system and three backup power generators (1- 500KW and 2- 750 KW) in the event of power failure or power outage.</p> <p>Each Nursing Home shall provide fire protection through elimination of fire hazards. All portions of the existing facility shall comply with the requirements of Chapter 19 (Existing Health Care Occupancies) and all new portions shall comply with Chapter 18 (New health Care Occupancies) as written in the Code for Safety to Life from Fire in Buildings and Structures, published by the National Fire Protection Association (NFPA), known as the Life Safety Code and its applicable referenced publications. The edition shall be described in 42 CFR 483, requirements for Long Term Facilities, known as NFPA 101 (2012 Edition).</p> <p>Based on the findings of October 16 to 17, 2018 Victoria Nursing and Rehabilitation Center was</p>	K 000		

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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 000	Continued From page 1	K 000			
K 918	<p>not in compliance and the following deficiencies were cited.</p> <p>Electrical Systems - Essential Electric Syste CFR(s): NFPA 101</p> <p>Electrical Systems - Essential Electric System Maintenance and Testing</p> <p>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.</p> <p>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 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.</p> <p>6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA</p>	K 918	11/12/18		

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K 918	<p>Continued From page 2</p> <p>111, 700.10 (NFPA 70)</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to provide documentation that the electrical utilities, and components were maintained in safe condition within the facility and failed to provide documentation showing proper inspecting, testing, and maintenance of the emergency power supply systems which could result in possible failure of the emergency power supply system during a power loss event which could endanger the residents, staff, or other building occupants.</p> <p>The findings include:</p> <p>Observation and record review with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:00AM revealed, the facility could not provide documentation the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW(Kilowatt) generator breakers, feeders and branches. Electrical Equipment not inspected, exercised, tested and maintained as required renders the equipment unreliable. Ref. NFPA 99-6.4.4.1.2.1</p> <p>Record review and interview with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:30AM revealed, the facility could not provide documentation for the required yearly major preventive maintenance and testing on two of the three emergency generators as required. Ref NFPA 8.1 and NFPA 110-8.3 and NFPA</p>	K 918			

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K 918	Continued From page 3 110-8.4	K 918			

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 35960960	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 05 - MAIN LIC B. WING _____		(X3) DATE SURVEY COMPLETED 10/17/2018
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K 000	<p>INITIAL COMMENTS</p> <p>An unannounced annual State Re-Licensure Life Safety Survey was conducted on October 16 to 17, 2018 at Victoria Nursing and Rehabilitation Center (provider # 106031) located at 955 NW 3rd St., Miami FL. 33128. Under the Florida Administrative 59A-4 for compliance with NFPA 101 (2012 Edition) known as the Life Safety Code and all of its applicable referenced publications. Victoria Nursing and Rehabilitation Center occupies approximately 132,183 maintainable square feet, of an eight story building with leased space not included in this survey on the second floor and on the eighth floor, built in 1971 of type I(332) construction with 264 reident beds under the State Licensure.</p> <p>The building is protected with an automatic sprinkler system with a monitored fire alarm system and three backup power generators (1- 500KW and 2- 750 KW) in the event of power failure or power outage.</p> <p>Each Nursing Home shall provide fire protection through elimination of fire hazards. All portions of the existing facility shall comply with the requirements of Chapter 19 (Existing Health Care Occupancies) and all new portions shall comply with Chapter 18 (New health Care Occupancies) as written in the Code for Safety to Life from Fire in Buildings and Structures, published by the National Fire Protection Association (NFPA), known as the Life Safety Code and its applicable referenced publications. The edition shall be described in Chapter 69A-3, Florida Administrative Code, known as NFPA 101 (2012 Edition), and the Uniform Fire Safety Standard for the State of Florida.</p> <p>Based on the findings of October 16 to 17, 2018, Victoria Nursing and Rehabilitation Center was not in compliance and the following deficiencies were cited.</p>	K 000			

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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Agency for Health Care Administration

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K 918	<p>NFPA 99 Electrical Systems - Essential Electric Syste</p> <p>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 circuits are marked and readily identifiable. 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)</p> <p>This Statute or Rule is not met as evidenced by: Based on observation, interview, and record review, the facility failed to provide documentation</p>	K 918		11/12/18
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Agency for Health Care Administration

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K 918	<p>Continued From page 2</p> <p>that the electrical utilities, and components were maintained in safe condition within the facility and failed to provide documentation showing proper inspecting, testing, and maintenance of the emergency power supply systems which could result in possible failure of the emergency power supply system during a power loss event which could endanger the residents, staff, or other building occupants.</p> <p>The findings include:</p> <p>Observation and record review with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:00AM revealed, the facility could not provide documentation the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW(Kilowatt) generator breakers, feeders and branches. Electrical Equipment not inspected, exercised, tested and maintained as required renders the equipment unreliable. Ref. NFPA 99-6.4.4.1.2.1</p> <p>Record review and interview with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:30AM revealed, the facility could not provide documentation for the required yearly major preventive maintenance and testing on two of the three emergency generators as required. Ref NFPA 8.1 and NFPA 110-8.3 and NFPA 110-8.4</p> <p>Class III</p>	K 918		

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E 000	<p>Initial Comments</p> <p>An unannounced recertification survey was completed on October 17, 2018 at Victoria Nursing and Rehabilitation. The facility is in compliance with 42 CFR 483.73 Condition of Participation for Emergency Preparedness for long term care facilities.</p>	E 000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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K 000	<p>INITIAL COMMENTS</p> <p>An unannounced annual Federal Re-Certification Life Safety Survey was conducted on October 16 to 17, 2018 at Victoria Nursing and Rehabilitation Center (provider # 106031) located at 955 NW 3rd St., Miami, FL. 33128. Under the 42 CFR 483, requirements for Long Term Facilities, for compliance with National Fire Protection Association (NFPA) 101 (2012 Edition) known as the Life Safety Code and all of its applicable referenced publications. The Victoria Nursing and Rehabilitation Center occupies approximately 132,183 maintainable square feet, of an eight story building with leased space not included in this survey on the second floor and on the eighth floor, built in 1971 of type I(332) construction with 264 resident beds.</p> <p>The building is protected with an automatic sprinkler system with a monitored fire alarm system and three backup power generators (1- 500KW and 2- 750 KW) in the event of power failure or power outage.</p> <p>Each Nursing Home shall provide fire protection through elimination of fire hazards. All portions of the existing facility shall comply with the requirements of Chapter 19 (Existing Health Care Occupancies) and all new portions shall comply with Chapter 18 (New health Care Occupancies) as written in the Code for Safety to Life from Fire in Buildings and Structures, published by the National Fire Protection Association (NFPA), known as the Life Safety Code and its applicable referenced publications. The edition shall be described in 42 CFR 483, requirements for Long Term Facilities, known as NFPA 101 (2012 Edition).</p> <p>Based on the findings of October 16 to 17, 2018 Victoria Nursing and Rehabilitation Center was</p>	K 000		

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K 918	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 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	K 918		11/12/18	

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K 918	<p>Continued From page 2</p> <p>111, 700.10 (NFPA 70)</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to provide documentation that the electrical utilities, and components were maintained in safe condition within the facility and failed to provide documentation showing proper inspecting, testing, and maintenance of the emergency power supply systems which could result in possible failure of the emergency power supply system during a power loss event which could endanger the residents, staff, or other building occupants.</p> <p>The findings include:</p> <p>Observation and record review with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:00AM revealed, the facility could not provide documentation the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW(Kilowatt) generator breakers, feeders and branches. Electrical Equipment not inspected, exercised, tested and maintained as required renders the equipment unreliable. Ref. NFPA 99-6.4.4.1.2.1</p> <p>Record review and interview with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:30AM revealed, the facility could not provide documentation for the required yearly major preventive maintenance and testing on two of the three emergency generators as required. Ref NFPA 8.1 and NFPA 110-8.3 and NFPA</p>	K 918	<p>Plan for specific residents: No specific resident mentioned. Method to assure compliance for other residents: On 11/17/2018, C.E.O in-serviced the Maintenance Director, Administrator and the Director of Facilities on keeping documentation available to show the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW (Kilowatt) generator breakers, feeders and branches. On 11/17/2018 C.E.O in-serviced the Maintenance Director, Administrator and the Director of Facilities on keeping documentation available to show the facility performed the yearly mayor preventive maintenance and testing on two of the three emergency generators of the facility as required. System: As of 11/25/2018 Maintenance Director will check to ensure the documentation is available to show the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW (Kilowatt) generator breakers, feeders and branches. As of 11/25/2018 Maintenance Director will check to ensure the documentation is available to show the facility performed</p>	

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NAME OF PROVIDER OR SUPPLIER VICTORIA NURSING & REHABILITATION CENTER, INC.			STREET ADDRESS, CITY, STATE, ZIP CODE 955 NW 3RD ST MIAMI, FL 33128		
(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 918	Continued From page 3 110-8.4	K 918	<p>the yearly mayor preventive maintenance and testing on two of the three emergency generators of the facility as required.</p> <p>Monitoring: Risk Manager will check on a quarterly basis to make sure documentation is available to show the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW (Kilowatt) generator breakers, feeders and branches. Risk Manager will report findings to the Q.A. Committee monthly; The Q.A. Committee will recommend a corrective plan of action if necessary.</p> <p>Risk Manager will check on a quarterly basis to make sure documentation is available to show the facility performed the yearly mayor preventive maintenance and testing on two of the three emergency generators of the facility as required. Risk Manager will report findings to the Q.A. Committee monthly; The Q.A. Committee will recommend a corrective plan of action if necessary.</p> <p>This Plan of Corrections does not constitute an admission that the deficiencies alleged did in fact exist. The Plan of Correction is filed as evidence of the facility's desire to comply with the requirements and to continue to provide high quality resident care.</p>		

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 35960960	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 05 - MAIN LIC B. WING _____	(X3) DATE SURVEY COMPLETED 10/17/2018
NAME OF PROVIDER OR SUPPLIER VICTORIA NURSING & REHABILITATION CENTER, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 955 NW 3RD ST MIAMI, FL 33128		
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K 000	<p>INITIAL COMMENTS</p> <p>An unannounced annual State Re-Licensure Life Safety Survey was conducted on October 16 to 17, 2018 at Victoria Nursing and Rehabilitation Center (provider # 106031) located at 955 NW 3rd St., Miami FL. 33128. Under the Florida Administrative 59A-4 for compliance with NFPA 101 (2012 Edition) known as the Life Safety Code and all of its applicable referenced publications. Victoria Nursing and Rehabilitation Center occupies approximately 132,183 maintainable square feet, of an eight story building with leased space not included in this survey on the second floor and on the eighth floor, built in 1971 of type I(332) construction with 264 reident beds under the State Licensure.</p> <p>The building is protected with an automatic sprinkler system with a monitored fire alarm system and three backup power generators (1- 500KW and 2- 750 KW) in the event of power failure or power outage.</p> <p>Each Nursing Home shall provide fire protection through elimination of fire hazards. All portions of the existing facility shall comply with the requirements of Chapter 19 (Existing Health Care Occupancies) and all new portions shall comply with Chapter 18 (New health Care Occupancies) as written in the Code for Safety to Life from Fire in Buildings and Structures, published by the National Fire Protection Association (NFPA), known as the Life Safety Code and its applicable referenced publications. The edition shall be described in Chapter 69A-3, Florida Administrative Code, known as NFPA 101 (2012 Edition), and the Uniform Fire Safety Standard for the State of Florida.</p> <p>Based on the findings of October 16 to 17, 2018, Victoria Nursing and Rehabilitation Center was not in compliance and the following deficiencies were cited.</p>	K 000		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

Electronically Signed

11/12/18

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 35960960	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 05 - MAIN LIC B. WING _____	(X3) DATE SURVEY COMPLETED 10/17/2018
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K 918	<p>NFPA 99 Electrical Systems - Essential Electric Syste</p> <p>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 circuits are marked and readily identifiable. 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)</p> <p>This Statute or Rule is not met as evidenced by: Based on observation, interview, and record review, the facility failed to provide documentation</p>	K 918	<p>Plan for specific residents: No specific resident mentioned.</p>	11/12/18
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K 918	<p>Continued From page 2</p> <p>that the electrical utilities, and components were maintained in safe condition within the facility and failed to provide documentation showing proper inspecting, testing, and maintenance of the emergency power supply systems which could result in possible failure of the emergency power supply system during a power loss event which could endanger the residents, staff, or other building occupants.</p> <p>The findings include:</p> <p>Observation and record review with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:00AM revealed, the facility could not provide documentation the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW(Kilowatt) generator breakers, feeders and branches. Electrical Equipment not inspected, exercised, tested and maintained as required renders the equipment unreliable. Ref. NFPA 99-6.4.4.1.2.1</p> <p>Record review and interview with the Maintenance Director, Administrator and the Director of Facilities on October 17, 2018 at 11:30AM revealed, the facility could not provide documentation for the required yearly major preventive maintenance and testing on two of the three emergency generators as required. Ref NFPA 8.1 and NFPA 110-8.3 and NFPA 110-8.4</p> <p>Class III</p>	K 918	<p>Method to assure compliance for other residents:</p> <p>On 11/17/2018, C.E.O in-serviced the Maintenance Director, Administrator and the Director of Facilities on keeping documentation available to show the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW (Kilowatt) generator breakers, feeders and branches.</p> <p>On 11/17/2018 C.E.O in-serviced the Maintenance Director, Administrator and the Director of Facilities on keeping documentation available to show the facility performed the yearly mayor preventive maintenance and testing on two of the three emergency generators of the facility as required.</p> <p>System:</p> <p>As of 11/25/2018 Maintenance Director will check to ensure the documentation is available to show the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW (Kilowatt) generator breakers, feeders and branches.</p> <p>As of 11/25/2018 Maintenance Director will check to ensure the documentation is available to show the facility performed the yearly mayor preventive maintenance and testing on two of the three emergency generators of the facility as required.</p> <p>Monitoring: Risk Manager will check on a quarterly</p>	
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K 918	Continued From page 3	K 918	<p>basis to make sure documentation is available to show the facility performed the required main, feeder and breaker exercise as required by National Fire Protection Association (NFPA) and manufactures recommendation on the two 750 KW (Kilowatt) generator breakers, feeders and branches. Risk Manager will report findings to the Q.A. Committee monthly; The Q.A. Committee will recommend a corrective plan of action if necessary.</p> <p>Risk Manager will check on a quarterly basis to make sure documentation is available to show the facility performed the yearly mayor preventive maintenance and testing on two of the three emergency generators of the facility as required. Risk Manager will report findings to the Q.A. Committee monthly; The Q.A. Committee will recommend a corrective plan of action if necessary.</p> <p>This Plan of Corrections does not constitute an admission that the deficiencies alleged did in fact exist. The Plan of Correction is filed as evidence of the facility's desire to comply with the requirements and to continue to provide high quality resident care.</p>	