

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

PRINTED: 10/30/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105803	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 09/13/2019
NAME OF PROVIDER OR SUPPLIER HIALEAH NURSING AND REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 190 W 28TH STREET HIALEAH, FL 33010		
(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	<p>Initial Comments</p> <p>During an unannounced Fire & Life Safety recertification survey conducted on 09/12/2019-09/13/2019 at Hialeah Nursing and Rehabilitation Center, a nursing home in Hialeah, Florida, Emergency Preparedness was reviewed.</p> <p>Hialeah Nursing and Rehabilitation Center is in compliance with Emergency Preparedness per Code of Federal Regulations (CFR) 42, Part 483.73, Requirement for Long-Term Care Facilities.</p>	E 000			

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

TITLE

(X6) DATE

Electronically Signed

10/03/2019

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K 000	INITIAL COMMENTS An unannounced Fire & Life Safety recertification survey was conducted 09/12/2019-09/13/2019 at Hialeah Nursing and Rehabilitation Center, a nursing home in Hialeah, Florida. Hialeah Nursing and Rehabilitation Center is not in compliance with 42 CFR 483 Subpart B, 42 CFR 488.307, and National Fire Protection Association (NFPA) 101 (2012 edition) requirements for nursing homes. Initial Plan Review: 1988 Existing NFPA 220 Construction Type: II (222) Number of beds: 276 Census: 253 The following is description of the noncompliance.	K 000		
K 741 SS=D	Smoking Regulations CFR(s): NFPA 101 Smoking Regulations Smoking regulations shall be adopted and shall include not less than the following provisions: (1) Smoking shall be prohibited in any room, ward, or compartment where flammable liquids, combustible gases, or oxygen is used or stored and in any other hazardous location, and such area shall be posted with signs that read NO SMOKING or shall be posted with the international symbol for no smoking. (2) In health care occupancies where smoking is prohibited and signs are prominently placed at all major entrances, secondary signs with language that prohibits smoking shall not be required. (3) Smoking by patients classified as not responsible shall be prohibited. (4) The requirement of 18.7.4(3) shall not apply where the patient is under direct supervision. (5) Ashtrays of noncombustible material and safe	K 741		10/13/19

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K 741	<p>Continued From page 1</p> <p>design shall be provided in all areas where smoking is permitted.</p> <p>(6) Metal containers with self-closing cover devices into which ashtrays can be emptied shall be readily available to all areas where smoking is permitted. 18.7.4, 19.7.4</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and staff interview, it was determined that the facility failed to properly maintain the smoking area as required as evidenced by lack of ashtrays of noncombustible material and safe design. This deficiency could affect all occupants of the facility in case of a fire or other emergency.</p> <p>Findings included:</p> <p>During the Life Safety Survey tour of the facility at 5:30 pm on 09/12/2019 with the Maintenance Director, it was observed that there was no ashtray of noncombustible material and safe design in the smoking area.</p> <p>During the Staff Interview at 5:30 pm on 09/12/2019, the Maintenance Director acknowledged that there was no ashtray of noncombustible material and safe design in the smoking area. He stated corrections will be done immediately. This finding was discussed and acknowledged by the Administrator during the exit conference.</p> <p>NFPA 101 (2012 Edition) 19.7.4 (5)</p>	K 741			

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K 000	<p>INITIAL COMMENTS</p> <p>An unannounced Fire & Life Safety re-licensure survey was conducted on 09/12/2019-09/13/2019 at Hialeah Nursing and Rehabilitation Center, a nursing home in Hialeah, Florida in accordance with National Fire Protection Association (NFPA) 1 and 101 (2015 edition) and applicable requirements of Florida State Fire Marshal's Rules and Regulations, Florida Administrative Code (F.A.C) 69A-3, F.A.C. 69A-53, F.A.C. 59A-4, and Florida Statutes (F.S.) 400 Part II, and F.S. 633.0215, adopting National Fire Protection Association (NFPA) 1 and 101 (2015 edition) known as the Florida Fire Prevention Code and all NFPA referenced standards and requirements adopted per NFPA 101, Chapter 2.</p> <p>The following is description of the deficiencies found at the time of the visit.</p>	K 000		
K 741 SS=D	<p>NFPA 101 Smoking Regulations</p> <p>Smoking Regulations Smoking regulations shall be adopted and shall include not less than the following provisions: (1) Smoking shall be prohibited in any room, ward, or compartment where flammable liquids, combustible gases, or oxygen is used or stored and in any other hazardous location, and such area shall be posted with signs that read NO SMOKING or shall be posted with the international symbol for no smoking. (2) In health care occupancies where smoking is prohibited and signs are prominently placed at all major entrances, secondary signs with language that prohibits smoking shall not be required. (3) Smoking by patients classified as not responsible shall be prohibited. (4) The requirement of 18.7.4(3) shall not apply where the patient is under direct supervision.</p>	K 741		10/13/19

AHCA Form 3020-0001
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K 741	<p>Continued From page 1</p> <p>(5) Ashtrays of noncombustible material and safe design shall be provided in all areas where smoking is permitted.</p> <p>(6) Metal containers with self-closing cover devices into which ashtrays can be emptied shall be readily available to all areas where smoking is permitted.</p> <p>18.7.4, 19.7.4 (Note smoking tower disposal receptacles are not ashtrays)</p> <p>This Statute or Rule is not met as evidenced by: Based on observations and staff interview, it was determined that the facility failed to properly maintain the smoking area as required as evidenced by lack of ashtrays of noncombustible material and safe design. This deficiency could affect all occupants of the facility in case of a fire or other emergency.</p> <p>Findings included:</p> <p>During the Life Safety Survey tour of the facility at 5:30 pm on 09/12/2019 with the Maintenance Director, it was observed that there was no ashtray of noncombustible material and safe design in the smoking area.</p> <p>During the Staff Interview at 5:30 pm on 09/12/2019, the Maintenance Director acknowledged that there was no ashtray of noncombustible material and safe design in the smoking area. He stated corrections will be done immediately. This finding was discussed and acknowledged by the Administrator during the exit conference.</p> <p>NFPA 101 (2015 Edition) 19.7.4 (5)</p>	K 741		

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