

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

PRINTED: 05/11/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315417	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/13/2019
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NAME OF PROVIDER OR SUPPLIER REFORMED CHURCH HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1990 ROUTE 18 NORTH OLD BRIDGE, NJ 08857
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(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 This facility is in substantial compliance with Appendix Z-Emergency Preparedness for All Provider and Supplier Types Interpretive Guidance 483.73, Requirements for Long Term Care (LTC) Facilities.	E 000		
K 000	INITIAL COMMENTS LIFE SAFETY CODE 101:2012 Existing THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R.	K 000		
K 914 SS=E	Electrical Systems - Maintenance and Testing CFR(s): NFPA 101 Electrical Systems - Maintenance and Testing Hospital-grade receptacles at patient bed locations and where deep sedation or general anesthesia is administered, are tested after initial installation, replacement or servicing. Additional testing is performed at intervals defined by documented performance data. Receptacles not listed as hospital-grade at these locations are tested at intervals not exceeding 12 months. Line isolation monitors (LIM), if installed, are tested at intervals of less than or equal to 1 month by actuating the LIM test switch per 6.3.2.6.3.6, which activates both visual and audible alarm. For LIM circuits with automated self-testing, this manual test is performed at intervals less than or equal to 12 months. LIM circuits are tested per 6.3.3.3.2 after any repair or renovation to the electric distribution system. Records are maintained of required tests and associated repairs or modifications, containing date, room or area tested, and results. 6.3.4 (NFPA 99)	K 914		11/27/19

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 11/26/2019
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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 914	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and interviews conducted on 11/6/19 and post survey electronic communication on 11/7/19 in the presence of facility management, it was determined that the facility failed to inspect non-hospital grade electrical receptacles in resident rooms for grounding, polarity, and blade retention every 12 months in accordance with NFPA 99.</p> <p>This deficient practice was evidenced by the following:</p> <p>In an interview, at 8:30 AM, the DF stated that rooms were provided with less than hospital grade receptacles.</p> <p>Throughout a tour of the facility, the surveyor along with the Director of Facilities (DF) and Administrator (LNHA) observed that resident rooms were provided with less than hospital grade electrical receptacles.</p> <p>A review of the facility's annual electrical inspection documentation revealed that the last inspection by the licensed vendor was conducted 8/6/18, 15 months ago. Further review of the inspection letter revealed that the licensed vendor did not inspect electrical receptacles in resident rooms.</p> <p>In a post Life Safety Code survey electronic communication, on 11/7/19, the LNHA provided a confirmation letter from the licensed inspection vendor indicating they are scheduled to inspect the receptacles for grounding, polarity, and blade retention on 11/11/19.</p> <p>NJAC 8:39-31.2(e)</p>	K 914	<p>1. There were no residents immediately affected by this deficient practice although there is a potential for residents to be affected. An outside licensed electrician tested the receptacles for polarity, grounding and blade retention on 11/13/19.</p> <p>2. Measures or systematic changes to ensure that the deficiency will not recur: Testing has been scheduled in our preventative maintenance system with a contracted electrician to perform the annual testing for polarity, grounding, and blade retention. Monitoring the continued effectiveness of the systematic change: The Director of Environmental Services/designee will be responsible for ensuring that the electrical contractor will perform the service annually. These findings will be documented in the life safety binder and reported at the quarterly QA meetings.</p>	

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K 914	Continued From page 2 NFPA 99	K 914			
K 918 SS=D	<p>A review of the facility's Electrical Systems - Essential Electric System CFR(s): NFPA 101</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.</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</p>	K 918		11/27/19	

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K 918	<p>Continued From page 3 installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70) This REQUIREMENT is not met as evidenced by: Based on documentation review on 11/4/19 and 11/6/19 and interview on 11/6/19 in the presence of facility management, it was determined that the facility failed to conduct 1 of 12 load tests on the emergency electrical generator for at least 30 minutes and failed to exercise the generator under load for a continuous 4 hours every 36 months in accordance with NFPA 99.</p> <p>This deficient practice was evidenced by the following:</p> <ol style="list-style-type: none"> On 11/4/19, a review of the emergency generator log for the previous 12 months revealed that the facility exercised the generator under load monthly. However, the load test documented for 5/22/19 was logged as 0.2 hours (12 minutes) in total including a cool down cycle for an actual power outage and did not meet the required 30 minute minimum. A review of the facility's complete generator log revealed that there was no documented four (4) hour load test in the previous 36 months. <p>On 11/6/19, the facility's Director of Facilities (DF) provided a service ticket indicating the licensed vendor conducted a four (4) hour load bank test yesterday, 11/5/19, after the surveyor identified the missing test. Although the facility provided the service ticket that the test was conducted, the report was not yet available for review.</p> <p>The facility could not provide any other test or outage that operated the generator under load for</p>	K 918	<ol style="list-style-type: none"> There were no residents immediately affected by deficient practice although there is a potential for residents to be affected. On 11/6/19 the 4 hour load bank test was completed. Measures or systematic changes to ensure that the deficiencies will not recur: Employee in-services were initiated on 11/14/19 by the Director of Environmental Services on proper documentation, i.e. recording run times to ensure the preventative maintenance schedule is followed accordingly. Monitoring the continued effectiveness of the systematic change: <p>The Director of Environmental Services/designee will audit the weekly and monthly generator logs to validate accurate run times. These findings will be documented in the life safety binder and reported at the quarterly QA meetings.</p>	

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K 918	Continued From page 4 four (4) continuous hours within the previous 36 months. In an interview, at 8:30 AM, the DF confirmed the surveyor's findings. NJAC 8:39-31.2(e) NFPA 99	K 918			