

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

PRINTED: 12/08/2021  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>315298</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/06/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CRESTWOOD MANOR</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>50 LACEY ROAD WHITING, NJ 08759</b>
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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
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E 000	Initial Comments	E 000		
	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.			
K 000	INITIAL COMMENTS  LIFE SAFETY CODE 101:2012 Existing	K 000		
	THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R.			
K 918 SS=E	Electrical Systems - Essential Electric System 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	K 918		8/20/19

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

TITLE

(X6) DATE

Electronically Signed

08/16/2019

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 918	<p>Continued From page 1</p> <p>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 111, 700.10 (NFPA 70)</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on documentation review and interview on 7/30/19 in the presence of facility management, it was determined that the facility failed to inspect the emergency generator weekly for 24 of 52 weeks and failed to conduct 4 of the required 12 load tests on the emergency generator Annually in accordance with NFPA 99.</p> <p>This deficient practice was evidenced by the following:</p> <ol style="list-style-type: none"> <li>1. A review of the facility's emergency generator log for the previous 12 months revealed that there were no entries for weekly inspections from 1/28/19 to 7/12/19 (24 of 52 weeks).</li> <li>2. The review of the generator log also revealed that the facility did not exercise the emergency generator between these same dates, 1/28/19 to 7/12/19. This resulted in the facility conducting only 8 of the 12 required load tests for the previous 12 months.</li> </ol> <p>In an interview, at 1:15 PM, the Facilities</p>	K 918	<p>How the corrective action will be accomplished for those residents affected by the deficient practice.</p> <p>No residents were affected by the deficient practice. After further investigation it was determined that the assigned role of weekly generator inspection was not monitored due to the transition of key staff members.</p> <ol style="list-style-type: none"> <li>2. How the facility will identify other residents having the potential to be affected by the same deficient practice. All residents have the potential to be affected by the deficient practice.</li> <li>3. Measures or systematic changes to ensure that the deficiencies will not recur In-servicing was conducted to the maintenance staff with regards to the requirement of weekly emergency generator inspections. Weekly review of emergency generator inspection will be reviewed in the roles and responsibilities of the maintenance staff in the job descriptions to ensure that this will not</li> </ol>		

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K 918	Continued From page 2 Manager stated that he was aware the previous manager did not conduct these required tests and inspections.  NJAC 8:39-31.2(e), 31.2(g) NFPA 99, 110	K 918	occur again. 4. Monitoring the continued effectiveness of the systemic change The Director of Maintenance will assign staff to inspect the emergency generator weekly. The Director of Maintenance will be responsible for monitoring the weekly inspection of the emergency generator log located in the maintenance office. The monitoring of this log will ensure that the emergency generator is being inspected weekly for compliance. The Director of Maintenance will submit a monthly report to be reviewed by the Administrator at the QAPI meetings monthly, for 6 months. To ensure solutions are sustained the maintenance department will also run the monthly load test of the generator. This monthly load test will be logged and the Maintenance Director will review the log monthly. The monthly log of the load test will be reviewed by the Administrator at the QAPI meeting monthly, for 6 months. 5. Each deficiency is assigned only one completion date The compliance date for this POC is August 20, 2019		