

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

PRINTED: 09/20/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315158	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/01/2019
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NAME OF PROVIDER OR SUPPLIER RIDGEWOOD CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 330 FRANKLIN TPK RIDGEWOOD, NJ 07450
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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		
K 000	<p>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.</p> <p>INITIAL COMMENTS</p> <p>LIFE SAFETY CODE 101:2012</p>	K 000		
K 901 SS=C	<p>THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R.</p> <p>Fundamentals - Building System Categories CFR(s): NFPA 101</p> <p>Fundamentals - Building System Categories Building systems are designed to meet Category 1 through 4 requirements as detailed in NFPA 99. Categories are determined by a formal and documented risk assessment procedure performed by qualified personnel. Chapter 4 (NFPA 99)</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and interview on 10/30/19, it was determined that the facility failed to conduct a formal building systems risk assessment as required by NFPA 99.</p> <p>This deficient practice was evidenced by the following:</p>	K 901	<p>K901 SS=C No residents were affected by this practice All residents had the potential to be affected The Facility conducted a formal building</p>	12/4/19

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Electronically Signed	TITLE	(X6) DATE 11/27/2019
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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 901	<p>Continued From page 1</p> <p>A review of the facility's Life Safety Code records at 12:10 PM revealed that the facility did not have a documented process for performing a risk assessment of their building systems. During the record review, the surveyor requested any additional facility records, that would indicate that an NFPA 99 building systems risk assessment was done.</p> <p>As of 1:55 PM, the surveyor had not received any additional information or records. Also, at that time, the facility's Administrator indicated in an interview that the facility was unable to provide documents of an NFPA 99 building systems risk assessment. The Administrator offered to conduct one and provide the documentation accordingly.</p> <p>During the Life Safety Code survey exit at 1:58 PM, the surveyor informed the Administrator that the finding noted above was identified as an issue that the facility should address.</p> <p>NJAC 8:39-31.2(e)</p>	K 901	<p>systems risk assessment on 10/31/19. The Maintenance Director will audit the Emergency Preparedness Book on a monthly basis to ensure all documentation is current and that the facility team reviews building systems risk assessment every quarter.</p> <p>The Maintenance Director will report the status of the Emergency Preparedness Plan to the QAPI Committee on a monthly basis.</p> <p>The Administrator will ensure the building systems risk assessment is reviewed by the team and updates made as needed by October 31, 2019 and will ensure the building Risk assessment is maintained in the EPP.</p>		