

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

PRINTED: 07/17/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315267	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/15/2019
NAME OF PROVIDER OR SUPPLIER ABIGAIL HOUSE FOR NURSING & REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE 1105 -1115 LINDEN STREET CAMDEN, NJ 08102	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	D 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. THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R.	K 000		
K 211 SS=D	Means of Egress - General CFR(s): NFPA 101 Means of Egress - General Aisles, passageways, corridors, exit discharges, exit locations, and accesses are in accordance with Chapter 7, and the means of egress is continuously maintained free of all obstructions to full use in case of emergency, unless modified by 18/19.2.2 through 18/19.2.11. 18.2.1, 19.2.1, 7.1.10.1 This REQUIREMENT is not met as evidenced by: Based on observation and interview on 11/7/2019, in the presence of the facility Maintenance Director (MD), it was determined that the facility failed to maintain exit access free from obstructions. This deficient practice was evidenced by the following: At 10:17 AM, the surveyor observed in the ^{NJSA 4} wing Multi-Purpose/ Dining room that there was one 8 foot long folding table stored in front of the	K 211	1) The exit doors that were not in compliance with NFPA 101, were immediately corrected by removing the obstructions to create a clear path for egress. The table in the dining room was removed from the exit door. The oxygen cart was removed from the exit door in the storage room. 2) All exit doors can be affected by this practice	11/26/19

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

TITLE

(X6) DATE

Electronically Signed

11/28/2019

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 211	<p>Continued From page 1</p> <p>designated exit discharge door leading to the outside. At this time, the surveyor asked the MD, "Should the exit discharge door be blocked." The MD said, "No, someone must have done it last night." Later at 10:52 AM, the surveyor observed in the ^{NJSA 4} wing oxygen storage room, one oxygen storage cart blocking the designated exit discharge door out of the room.</p> <p>The surveyor interviewed both times with the MD, who acknowledged and agreed, that the means of egress must be continuously maintained free of all obstructions to the full use in case of emergency.</p> <p>NJAC 8:39-31.1 (c), 31.2 (e).</p>	K 211	<p>3) The Director of Maintenance/Assistant Maintenance Director will do weekly rounds to inspect all exit doors to ensure they are free of obstructions. They will log the inspection date and time to confirm inspection. In addition, all exit doors will have clear signage that will say "Exit Door, Do Not Block".</p> <p>4)The Director of Maintenance/Assistant Maintenance Director will report to the QA/QAPI Committee for the next four quarters. The report will include the inspection log and the findings that the Director of Maintenance/Assistant Maintenance Director have observed in their inspections.</p>		