

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

PRINTED: 07/25/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315149	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 11/02/2020
NAME OF PROVIDER OR SUPPLIER STERLING MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 794 N FORKLANDING ROAD MAPLE SHADE, NJ 08052	
(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	E 000		
K 000	INITIAL COMMENTS LIFE SAFETY CODE 101:2012	K 000		
K 353 SS=E	THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R. Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced	K 353		2/25/21

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

TITLE

(X6) DATE

Electronically Signed

11/13/2020

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 353	<p>Continued From page 1</p> <p>by: Based on observation, interview, and record review on 10/29/20 in the presence of the facility Regional Maintenance Director, Administrator and Facility Owner, it was determined that the facility failed to maintain the sprinkler system in operating condition according to NFPA 25/13 regulations. This deficient practice was evidenced by the following:</p> <p>1. At 10:45 AM the surveyor reviewed the provided fire sprinkler quarterly documentation from the facility vendor. The documents reviewed were dated: 10/22/20, (7/7/2020 annual Inspection), and 4/6/2020 in which all the inspection reports from 4/29/2016 to the current report dated 10/22/2020 indicated that:</p> <p>*Copper Pipe throughout attics shows signs of corrosion/mechanical patches (found during the Annual Inspection). A document from the facility vendor dated 2/13/2020 indicated that [REDACTED] Fire Department (Authority having Jurisdiction) is requiring that the leaks in the system be fixed permanently (no repair clamps) and a 200 psi for 2-hour hydrostatic test be performed with no leaks. The most current fire sprinkler vendor document dated 10/22/2020 indicated on page 2. under:</p> <p style="text-align: center;">Pipes and Fittings (visible):</p> <p>NO: 1. in good condition and no external corrosion NO: 2. no leaks or mechanical damage NO: 3. correct alignment- no external loads</p>	K 353	<p>K-tag 353</p> <p>1. The Escutcheon plates in resident rooms [REDACTED], and [REDACTED] plus the two interior closets were installed properly. The ceiling tiles were recut around the sprinkler heads. The facility is in the process of contacting multiple sprinkler companies for a proposal to replace/repair the Sprinkler system.</p> <p>2. All residents and staff have the potential to be affected by this deficient practice when smoke and heat can rise up through the hole where the tile is located and fill the space above the ceiling before it attempts to activate the sprinkler head and fire detection system. All residents and staff members have the potential to be affected when the Sprinkler system may not give adequate protection during a fire.</p> <p>3. On 10/30/2020, The Administrator and Director of Maintenance were in-serviced by the Corporate Maintenance Director as to the importance of the correct installation of Escutcheon plates and the proper cutting of ceiling tiles. A Time waiver has been requested with an estimated date of completion of one year. Fire drills have been increased from monthly to twice a month. Two extra fire extinguishers have been added to the long hallway of the nurses stations. All staff were in-serviced by the Administrator and Director of Nurses as well as the Director of maintenance as to the policy of</p>		

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K 353	<p>Continued From page 2</p> <p style="text-align: center;">Building:</p> <p>NO: 4. wet piping not exposed to freezing temperatures</p> <p>In an interview with the Facility owner on 10/29/20 at 11:13 A.M. he stated that currently there is no documentation indicating that the pipe was fixed permanently and a 200 psi for 2-hour hydrostatic test was performed.</p> <p>2. While touring the building on 10/29/20 from 9:10 AM to 11:15 AM the surveyor, Regional Maintenance Director, Administrator, and Facility Owner observed fire sprinkler heads with escutcheon plates that were not in the proper position along with ceiling tiles with bad cuts around the fire sprinkler heads in the following areas of the facility:</p> <p>Resident Rooms: [REDACTED] and [REDACTED]-2- (interior closets)</p> <p>An interview was conducted with the Regional Maintenance Director during the observations and he agreed and stated that the ceiling tiles and escutcheon plates must be in the proper position and the ceiling tiles must have better cuts around the fire sprinkler heads in the facility.</p> <p>The ceiling tile is an integral part of the sprinkler system. When fire occurs the smoke and heat rises until it meets the ceiling, than the smoke and heat travels horizontally until it encounters a smoke detector or a sprinkler head. If there is a gap greater than 1/8 inch from a missing and/or an escutcheon plate not in proper position and/or a broken ceiling tile, the sprinkler head function is now impaired. The smoke and heat will rise up</p>	K 353	<p>notification to the fire company and the facility Chain of Command.</p> <p>4. The Administrator and Director of Maintenance will conduct daily rounds to assure that all escutcheon plates are in place. The Administrator will monitor the service and inspections of the Sprinkler system by the Sprinkler company to assure that the sprinkler in in proper working order. All findings will be reviewed at the Quality Assurance meeting x 2 quarters and ongoing. The project estimated completion date is still 12/30/2023.</p>		

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K 353	Continued From page 3 through the hole where the tile was located and fill up the space above the ceiling before it attempts to activate the sprinkler head and fire alarm detection system. NJAC 8:39-31.2(c) NJAC 8:39-31.2(e) NFPA 13, 25	K 353		