

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>315300</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/13/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ALARIS HEALTH AT HAMILTON PARK</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>525 MONMOUTH STREET JERSEY CITY, NJ 07302</b>
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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 923 SS=D	<p>THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE REQUIREMENTS AS SURVEYED UNDER CMS-2786R.</p> <p>Gas Equipment - Cylinder and Container Storage CFR(s): NFPA 101</p> <p>Gas Equipment - Cylinder and Container Storage Greater than or equal to 3,000 cubic feet Storage locations are designed, constructed, and ventilated in accordance with 5.1.3.3.2 and 5.1.3.3.3.</p> <p>&gt;300 but &lt;3,000 cubic feet Storage locations are outdoors in an enclosure or within an enclosed interior space of non- or limited- combustible construction, with door (or gates outdoors) that can be secured. Oxidizing gases are not stored with flammables, and are separated from combustibles by 20 feet (5 feet if sprinklered) or enclosed in a cabinet of noncombustible construction having a minimum 1/2 hr. fire protection rating.</p> <p>Less than or equal to 300 cubic feet In a single smoke compartment, individual cylinders available for immediate use in patient care areas with an aggregate volume of less than or equal to 300 cubic feet are not required to be</p>	K 923		4/23/21

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  Electronically Signed	TITLE	(X6) DATE  04/23/2021
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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 923	<p>Continued From page 1</p> <p>stored in an enclosure. Cylinders must be handled with precautions as specified in 11.6.2. A precautionary sign readable from 5 feet is on each door or gate of a cylinder storage room, where the sign includes the wording as a minimum "CAUTION: OXIDIZING GAS(ES) STORED WITHIN NO SMOKING."</p> <p>Storage is planned so cylinders are used in order of which they are received from the supplier. Empty cylinders are segregated from full cylinders. When facility employs cylinders with integral pressure gauge, a threshold pressure considered empty is established. Empty cylinders are marked to avoid confusion. Cylinders stored in the open are protected from weather.</p> <p>11.3.1, 11.3.2, 11.3.3, 11.3.4, 11.6.5 (NFPA 99) This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation and interview, it was determined that the facility failed to comply with the oxygen tank storage requirements of NFPA 99 as evidenced by the following:</p> <p>Oxygen tanks exceeding 300 cubic feet in volume (12 e-tanks) were stored within 5-feet of combustible items in one of three oxygen rooms. At 11:30 AM, the surveyor observed, in the presence of the facility's Maintenance Director and corporate Physical Plant Manager, 19 oxygen cylinders (e-tanks) stored within 1-foot of combustible items in the oxygen storage room located on the █ floor. The combustible items were multiple cardboard boxes containing assorted patient care supplies stored on a 6-shelf storage unit. The total volume of oxygen stored in this room was 475 cubic feet in volume, exceeding the maximum allowed by 175 cubic feet in volume (12 e-tanks).</p>	K 923	<p>1. Maintenance Director was educated by Regional Maintenance Director and Administrator.</p> <p>Maintenance Director educated all nursing, rehab, and maintenance staff will be educated on the maximum capacity of oxygen tanks that are able to be stored in the oxygen storage room on █ and █ floor.</p> <p>Oxygen tanks were removed from the █ floor oxygen storage room and were brought to the designated oxygen room on the █ floor.</p> <p>Oxygen signage was placed inside the oxygen storage room with the maximum capacity of oxygen tanks that are allowed in each</p>		

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K 923	<p>Continued From page 2</p> <p>This finding was verified by the Maintenance Director in an interview during the observation who indicated that he was aware of this requirement, there was no enforcement to ensure compliance and the nursing staff was informed each month that the maximum amount of e-tanks stored in oxygen rooms was 12.</p> <p>The surveyor verbally informed the facility's Administrator of this finding during the Life Safety Code survey exit conference at 2:00 PM.</p> <p>NFPA 99 - 11.3.1-4, 11.6.5 NJAC 8:39-31.2(e)</p>	K 923	<p>room on 4-6-21.</p> <p>Audit sheets were added to the oxygen room and will be completed three times a day by maintenance or designee to ensure the number of tanks does not exceed maximum capacity.</p> <p>2. All residents in the facility have the potential to be affected.</p> <p>3. Maintenance Director was educated by Regional Maintenance Director and Administrator.</p> <p>Maintenance Director educated all nursing, rehab, and maintenance staff will be educated on the maximum capacity of oxygen tanks that are able to be stored in the oxygen storage room on [REDACTED], and [REDACTED] floor.</p> <p>Oxygen tanks were removed from the [REDACTED] floor oxygen storage room and were brought to the designated oxygen room on the [REDACTED] floor.</p> <p>Oxygen signage was placed inside the oxygen storage room with the maximum capacity of oxygen tanks that are allowed in each room on 4-6-21.</p> <p>Audit sheets were added to the oxygen room and will be completed three times a day by maintenance or designee to ensure the number of tanks does not exceed maximum capacity.</p>		

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

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K 923	Continued From page 3	K 923	<p>4. Maintenance/Designee will complete count sheets three times a day for four months.</p> <p>Maintenance Director/Designee will audit daily to ensure that the number does not exceed the maximum capacity for 30 days. After 30 days, audits will be done twice a week for 90 days and then re-evaluated.</p> <p>All findings will be reported weekly to the Administrator and quarterly at the Quality Assurance Performance Improvement (QAPI) Meeting for review and recommendation.</p>		