

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

PRINTED: 08/02/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 315259	(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____		(X3) DATE SURVEY COMPLETED C 09/10/2020
NAME OF PROVIDER OR SUPPLIER PROMEDICA SKILLED NURSING & REHAB - MOUNTAINSIDE			STREET ADDRESS, CITY, STATE, ZIP CODE 1180 ROUTE 22 WEST MOUNTAINSIDE, NJ 07092		
(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	
K 000	INITIAL COMMENTS	K 000			
K 351 SS=D	<p>LIFE SAFETY CODE 101: 2012.</p> <p>THIS FACILITY IS NOT IN SUBSTANTIAL COMPLIANCE WITH THE MINIMUM LIFE SAFETY CODE 101: 2012.</p> <p>Sprinkler System - Installation CFR(s): NFPA 101</p> <p>Sprinkler System - Installation 2012 EXISTING</p> <p>Nursing homes, and hospitals where required by construction type, are protected throughout by an approved automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems.</p> <p>In Type I and II construction, alternative protection measures are permitted to be substituted for sprinkler protection in specific areas where state or local regulations prohibit sprinklers.</p> <p>In hospitals, sprinklers are not required in clothes closets of patient sleeping rooms where the area of the closet does not exceed 6 square feet and sprinkler coverage covers the closet footprint as required by NFPA 13, Standard for Installation of Sprinkler Systems.</p> <p>19.3.5.1, 19.3.5.2, 19.3.5.3, 19.3.5.4, 19.3.5.5, 19.4.2, 19.3.5.10, 9.7, 9.7.1.1(1)</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation, interview, and review of pertinent facility documents on 9/10/2020, it was determined that the facility failed to provide automatic fire sprinkler protection to all areas in accordance with NFPA 13. This deficient practice was evidenced by the following:</p> <p>At 9:52 a.m., the surveyor and the facility's</p>	K 351	<p>PRACTICE:</p> <p>Based on observation, interview, and review of pertinent facility documents on 9/10/2020, it was alleged that the facility failed to provide automatic fire sprinkler protection to all areas in accordance with NFPA 13. This alleged practice was</p>	10/12/20	

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

TITLE

(X6) DATE

Electronically Signed

10/12/2020

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 351	<p>Continued From page 1</p> <p>Director of Maintenance (DOM) observed that there was no fire sprinkler protection inside the 4 foot by 5 foot Heating, Ventilation, and Air Conditioning (HVAC) room located near the kitchen's automatic dish washing machine.</p> <p>At this time, the surveyor asked the DOM, "Do you see a sprinkler inside the room." The DOM looked inside and up at the drop ceiling and said, "No I don't."</p> <p>NJAC 8:39-31.1(c), 31.2(e) NFPA 13.</p>	K 351	<p>evidenced by the following: At 9:52 a.m., the surveyor and the facility's Director of Maintenance (DOM) observed that there was no fire sprinkler protection inside the 4 foot by 5 foot Heating, Ventilation, and Air Conditioning (HVAC) room located near the kitchen's automatic dish washing machine. At this time the surveyor asked the DOM, "Do you see a sprinkler inside the room." The DOM looked inside and up at the drop ceiling and said, "No I don't."</p> <p>1. Residents affected by alleged practice:</p> <p>The facility has an automatic fire sprinkler inside the 4 foot by 5 foot Heating, Ventilation, and Air Conditioning (HVAC) room located near the kitchen's automatic dish washing machine.</p> <p>2. Residents having the potential to be affected by alleged practice:</p> <p>Residents residing in the facility have potential to be affected by alleged practice.</p> <p>3. Measures to be implemented to ensure alleged practice does not occur:</p> <p>Director of Maintenance educated to ensure that automatic fire sprinkler protection is provided inside the 4 foot by 5 foot Heating, Ventilation, and Air Conditioning (HVAC) room located near the kitchen's automatic dish washing machine.</p> <p>4. How will the facility monitor the</p>		

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K 351	Continued From page 2	K 351	effectiveness of corrective action: Director of Maintenance and/or designee will randomly audit inside the 4 foot by 5 foot Heating, Ventilation, and Air Conditioning (HVAC) room located near the kitchen's automatic dish washing machine to ensure automatic fire sprinkler protection is provided weekly x4 and monthly x2. The findings of these audits will be presented to Quality Assurance Committee monthly x3 to ensure effectiveness and accuracy.		