

Autumn Care of Mechanicsville

12/18/19/Extension Request

To whom it may concern: Virginia Department of Fire Programs

Dear Franklin Troy Bower,

Autumn Care of Mechanicville is requesting a Time Limited Waiver. The K tag was K-321 Hazardous Areas-Enclosure. With this tag there is some damage to the top of the door where the closure goes on the door.

The door cited needs to be replaced. The company with whom we have contracted to replace the door is currently experiencing manufacturing time of 8-10 weeks. The update is that we are now asking for an extension on the time needed to repair the door. The door will be shipped on December 20th. We are asking for an extended time until January 15th to get the door install.

Enclosed is the Quote from Dominion Lock and Security Inc. with updated information on the time of the door install. Also there is an updated letter from Dominion Lock and Security Inc.

Also enclosed is all the information requested.

Please feel to email or call me about this matter.

Respectfully,

Autumn Care of Mechanicville

Yolanda James, EVS Director

Fred Long, Administrator

(X1) PROVIDER/SUPPLIER/CLIA

STATEMENT OF DEFICIENCIES

Printed: 10/02/2019 FORM APPROVED OMB NO. 0938-0391

(X3) DATE SURVEY

A. BUILDING 01 - MAIN BUILDING COMPLETED AND PLAN OF CORRECTION IDENTIFICATION NUMBER: 495413 B. WING 08/28/2019 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER **7600 AUTUMN PARKWAY AUTUMN CARE OF MECHANICSVILLE MECHANICSVILLE, VA 23116** (X5) COMPLETION SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY (EACH CORRECTIVE ACTION SHOULD BE **PREFIX** PRÉFIX CROSS-REFERENCED TO THE APPROPRIATE OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) K 000 INITIAL COMMENTS K 000 K321 Description of structure: The facility is a one story structure with an attic Type V (111). The smoke door that is Sprinkler Status: Fully sprinklered - NFPA 13 Damaged will be replaced. Will check all smoke doors for damage. An unannounced Standard Recertification Life We will inspected 10 smoke doors Safety Code Survey was conducted on 8/28/2019 in accordance with 42 Code of Federal for any damage per week for 5 weeks. Regulation, Part 483: Requirements for Long Any variances will be reported to the Term Care Facilities. The facility was surveyed for compliance using the LSC 2012 Existing Administrator and QAPI meeting monthly. regulations. The facility was not in compliance Date of correction will be delayed due to with the Requirements for Participation Medicare and Medicaid. Door company is behind 10weeks/ December 16th. (extension for the repair The findings that follow demonstrate of the door no later than January 15, 2020 non-compliance with Title 42 Code of Regulations. cc letter from Dominion Lock and Key. 483.70(a) et seq (Life Safety from Fire.) K 321 K 321 Hazardous Areas - Enclosure K321 SS=D CFR(s): NFPA 101 Hazardous Areas - Enclosure The smoke door that is Hazardous areas are protected by a fire barrier Damaged will be replaced. having 1-hour fire resistance rating (with 3/4 hour Will check all smoke doors for damage. fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1 or 19.3.5.9. We will inspected 10 smoke doors When the approved automatic fire extinguishing for any damage per week for 5 weeks. system option is used, the areas shall be Any variances will be reported to the separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Administrator and QAPI meeting monthly. Doors shall be self-closing or automatic-closing Date of correction will be delayed due to and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches Door company is behind 10weeks/ from the bottom of the door. cc letter from Dominlon Lock and Key. Describe the floor and zone locations of hazardous areas that are deficient in REMARKS. 19.3.2.1, 19.3.5.9 LABORATORY DIRECTOR'S OR PROVIDER SURPLIER REPRESENTATIVE'S SIGNATURE (X6) DATE TITLE

(X2) MULTIPLE CONSTRUCTION

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 prefection 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.

Printed: 10/02/2019 FORM APPROVED OMB NO. 0938-0391

(X3) DATE SURVEY

STATEMEN AND PLAN	EMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			01 - MAIN BUILDING	(X3) DATE SU COMPLET			
	495413			B. WING	08/28/2019			
AUTUMN CARE OF MECHANICSVILLE 7600 AU			DRESS, CITY, STATE, ZIP CODE AUTUMN PARKWAY ANICSVILLE, VA 23116					
(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 CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPR DEFICIENCY)	OULD BE COMPLETION		
K 321	Area Separation N/a. Boiler and Fuel-Ib. Laundries (large c. Repair, Maintena d. Soiled Linen Roce. Trash Collection (exceeding 64 gallof. Combustible Storover 50 square feeg. Laboratories (if chazard - see K322 This REQUIREME by: Based upon observation of maintained to por fire resistant ration There are doors the latching, are dama the required listing allow smoke and hodors. Findings include During the walkthrough the resisted to port the latching and the doors.	Automatic Spri A Fired Heater Rooms r than 100 square feance, and Paint Shop oms (exceeding 64 g Rooms ons) rage Rooms/Spaces et) classified as Severe	denced denced deas are daration and is areas. g and lo not have hat could rough the	K 321				

(X2) MULTIPLE CONSTRUCTION

Printed: 09/09/2019 FORM APPROVED OMB NO. 0938-0391

NAME OF PROVIDER OR SUPPLIER AUTUMN CARE OF MECHANICSVILLE STREET ADDRESS, CITY, STATE, ZIP CODE	TATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			A. BUILDING	G 01 - MAIN BUILDING	COMPLETED		
AUTUMN CARE OF MECHANICSVILLE 7600 AUTUMN PARKWAY MECHANICSVILLE, VA 23116 (X4) ID PREFIX TAG (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) (EACH DEFICIENCY) ID PREFIX TAG (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) K 321 K 321 Hazardous Areas - Enclosure CFR(s): NFPA 101 Hazardous Areas are protected by a fire barrier having 1-hour fire resistance rating (with 3/4 hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1 or 19.3.5.9. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door. Describe the floor and zone locations of					B. WING 08/			
(EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) K 321 K 321 Hazardous Areas - Enclosure CFR(s): NFPA 101 Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with 3/4 hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1 or 19.3.5.9. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door. Describe the floor and zone locations of	AUTUMN CARE OF MECHANICSVILLE 7600			ADDRESS, CITY, STATE, ZIP CODE AUTUMN PARKWAY				
Hazardous Areas - Enclosure Hazardous areas are protected by a fire barrier having 1-hour fire resistance rating (with 3/4 hour fire rated doors) or an automatic fire extinguishing system in accordance with 8.7.1 or 19.3.5.9. When the approved automatic fire extinguishing system option is used, the areas shall be separated from other spaces by smoke resisting partitions and doors in accordance with 8.4. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied protective plates that do not exceed 48 inches from the bottom of the door. Describe the floor and zone locations of	PREFIX (EACH DEFICIENCY MUS	T BE PRECEDED BY FULL	REGULATORY	PREFIX	(EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APP	OULD BE	(X5) COMPLETION DATE	
Area Automatic Sprinkler Separation N/A a. Boiler and Fuel-Fired Heater Rooms b. Laundries (larger than 100 square feet) c. Repair, Maintenance, and Paint Shops d. Soiled Linen Rooms (exceeding 64 gallons) e. Trash Collection Rooms (exceeding 64 gallons) f. Combustible Storage Rooms/Spaces (over 50 square feet) g. Laboratories (if classified as Severe Hazard - see K322) This REQUIREMENT is not met as evidenced by: Based upon observations hazardous areas are not maintained to provide required separation and or fire resistant ratings for the hazardous areas. There are doors that are not self closing and latching, are damaged and doors that do not have the required listing for door hardware that could allow smoke and hot gasses to pass through the	Hazardous Areas - Hazardous areas a having 1-hour fire r fire rated doors) or system in accordar When the approve system option is us separated from oth partitions and door Doors shall be self and permitted to ha protective plates th from the bottom of Describe the floor a hazardous areas th 19.3.2.1, 19.3.5.9 Area Separation N/ a. Boiler and Fuel- b. Laundries (large c. Repair, Maintena d. Soiled Linen Roe e. Trash Collection (exceeding 64 galle f. Combustible Sto (over 50 square fee g. Laboratories (if of Hazard - see K322 This REQUIREME by: Based upon observation of the resistant ration of the required listing the required listing	Enclosure are protected by a fire resistance rating (with an automatic fire exince with 8.7.1 or 19.3 d automatic fire exinced, the areas shall be respaces by smoke s in accordance with closing or automatic ave nonrated or field- at do not exceed 48 the door. and zone locations or nat are deficient in RI Automatic Spri A Fired Heater Rooms or than 100 square fe ance, and Paint Shop oms (exceeding 64 g Rooms ons) rage Rooms/Spaces et) NT is not met as evi vations hazardous ar orovide required sepa ngs for the hazardou at are not self closing ged and doors that of for door hardware the	a 3/4 hour tinguishing 3.5.9. guishing 8.5.9. guishing 8.4. e-closing applied inches fEMARKS. The ethors allons are a sare aration and as areas. g and lo not have a tat could	K 321				

(X2) MULTIPLE CONSTRUCTION

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(X6) DATE

TITLE

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

Printed: 09/09/2019 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		, ,	AULTIPLE CONSTRUCTION ILDING 01 - MAIN BUILDING (X3) DATE: COMPI		SURVEY LETED		
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AUTUMN CARE OF MECHANICSVILLE 7600 AU			UTUMN PA ANICSVILL	ARKWAY E, VA 23116			
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COMMONWEALTH of VIRGINIA

Virginia Department of Fire Programs

Michael T. Reilly EXECUTIVE DIRECTOR

State Fire Marshal's Office Division 1 1005 Technology Park Drive Glen Allen, VA 23059-4500 Phone: 804/ 371-0220

Department of Fire Programs Fax: 804/ 371-3367

09/09/2019

SEP 1 8 2019

Mr. Fred Long, Autumn Care Of Mechanicsville 7600 Autumn Parkway Mechanicsville, VA 23116

Administration

Dear Mr. Long

This concerns the unannounced recertification Life Safety Code survey of the referenced facility conducted 08/28/2019 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the Life Safety Code 2000 Existing regulation.

All institutional buildings must meet all applicable Life Safety Code (NFPA 101) requirements in accordance with the federal Long Term Care certification requirements issued by the Centers for Medicare and Medicaid Services (CMS), in order to participate in the Medicare/Medicaid programs. The findings listed on the attached form, CMS 2567, "Statement of Deficiencies and Plan of Correction", demonstrate non-compliance with Title 42 Code Federal of Regulations, 483.70(a) et seq Life Safety from Fire.

Prior to making expenditures to correct the noted deficiencies, you should have an approved plan of correction. It is strongly recommended that you check with local officials, since compliance with this report does not excuse you from complying with local codes and ordinances.

The federal LTC Enforcement Regulations remedies may be imposed by the Centers for Medicare and Medicaid Services (CMS) and/or the Virginia Department of Medical Assistance Services (DMAS) for any failure or continued failure to demonstrate compliance with both the Health and Life Safety Code requirements (Title 42, Code of Federal Regulations). For example, a Denial of Payment for New Admissions at the 90th day after a survey, or the Termination of the Provider Agreement at the 180th day after a survey, could be a result of uncorrected Life Safety Code citations as well as Health citations.

If any deficient practice is identified within either the Health or Life Safety Code requirements, a Plan of Correction (POC) developed by the provider must be returned to the surveying entity by 8/19/2019. To be considered acceptable, the POC must include five (5) components:

- 1. Address the corrective action taken for the identified problem
- 2. Address how facility will identify similar occurrences of the problem

Printed: 10/02/2019 FORM APPROVED OMB NO. 0938-0391

(X2) MULTIPLE CONSTRUCTION STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING 01 - MAIN BUILDING COMPLETED 495413 B. WING 08/28/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **AUTUMN CARE OF MECHANICSVILLE 7600 AUTUMN PARKWAY MECHANICSVILLE, VA 23116** SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PREFIX PROVIDER'S PLAN OF CORRECTION (X5) COMPLETION DATE (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) K 000 INITIAL COMMENTS K 000 Description of structure: The facility is a one story structure with an attic Type V (111). Sprinkler Status: Fully sprinklered - NFPA 13 An unannounced Standard Recertification Life Safety Code Survey was conducted on 8/28/2019 in accordance with 42 Code of Federal Regulation, Part 483: Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2012 Existing regulations. The facility was not in compliance with the Requirements for Participation Medicare and Medicaid. The findings that follow demonstrate non-compliance with Title 42 Code of Regulations, 483.70(a) et seq (Life Safety from Fire.) K 321 Hazardous Areas - Enclosure K 321 K321 SS=D CFR(s): NFPA 101 Hazardous Areas - Enclosure The smoke door that is Hazardous areas are protected by a fire barrier Damaged will be replaced. having 1-hour fire resistance rating (with 3/4 hour fire rated doors) or an automatic fire extinguishing Will check all smoke doors for damage. system in accordance with 8.7.1 or 19.3.5.9. We will inspected 10 smoke doors When the approved automatic fire extinguishing for any damage per week for 5 weeks. system option is used, the areas shall be separated from other spaces by smoke resisting Any variances will be reported to the partitions and doors in accordance with 8.4. Administrator and QAPI meeting monthly. Doors shall be self-closing or automatic-closing and permitted to have nonrated or field-applied Date of correction will be delayed due to protective plates that do not exceed 48 inches Door company is behind 10weeks/ from the bottom of the door. cc letter from Dominion Lock and Key. Describe the floor and zone locations of hazardous areas that are deficient in REMARKS. 19.3.2.1, 19.3.5.9 LABORATORY DIRECTOR'S OR PROVIDER/SURPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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Printed: 10/02/2019 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA				(X2) MULTIPL	E CONSTRUCTION	(X3) DATE SUP			
STATEMENT OF DEFICIENCIES (AT) IDENTIFICATION NUMBER:			A. BUILDING	GO: - Interest Dollars					
495413			B. WING	08/28/2019					
NAME OF P	ROVIDER OR SUPPLIER CARE OF MECHA	ANICSVILLE	7600 AL	DRESS, CITY, STATE, ZIP CODE AUTUMN PARKWAY ANICSVILLE, VA 23116					
(X4) ID PREFIX TAG	CAGUI DEFICIENCY MUS	TATEMENT OF DEFICIENCI T BE PRECEDED BY FULL ENTIFYING INFORMATION)	REGULATURE	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPR DEFICIENCY)	JLD BE	(X5) COMPLETION DATE		
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Autumn Care of Mechanicsville

To whom it may concern: Virginia Department of Fire Programs

Dear Franklin Troy Bower,

Autumn Care of Mechanicville is requesting a Time Limited Waiver. The K tag was K-321 Hazardous Areas-Enclosure. With this tag there is some damage to the top of the door where the closure goes on the door.

The door cited needs to be replaced. The company with whom we have contracted to replace the door is currently experiencing manufacturing time of 8-10 weeks.

Enclosed is the Quote from Dominion Lock and Security Inc.

Please feel to email or call me about this matter.

Respectfully,

Autumn Care of Mechanicville

Yolanda James, EVS Director

Eved Long, Administrator

Department of Fire Programs

Administration



Autumn Care of Mechanicsville 7600 Autumn Park Way Mechanicsville, VA 23116 (804) 730-0009

To Whom It May Concern,

As of Thursday September 26th, 2019, Dominion Lock and Security has scheduled the following repairs and maintenance to take place at Autumn Care of Mechanicsville:

- 1. Replace Storage Room Door with a new 3'8" x 6'8" Laminate Wood Door, 45 Min UL Rating, Factory Finished to match existing openings.
- 2. Installation of Smoke Seal at above opening

All material was ordered on October 1st, 2019 with a 9 to 11 week manufacturers lead time.

The above listed materials are scheduled to ship the week of December 16th, 2019.

Upon receipt of materials, installation will be promptly scheduled.

Please feel free to contact Dominion Lock and Security with any questions or concerns at your earliest convenience.

Respectfully,

Michael Lyden Dominion Lock and Security



Date:

09/18/19

To:

Yolanda James

From:

Mike Lyden

Re:

Autumn Care of Mechanicsville

PROPOSAL

Dominion Lock and Security is pleased to submit the following estimates for your approval:

Laminate Faced Wood Door:

- (1) 3'8" 6'8" Laminate Wood Door, 45 Min UL Rating, Factory Finished to match existing
- (1) Smoke Seal
- (3) Hinge Filler Plates

Removal of current door and hardware, transferring of current hardware to new door, installation of new door with existing hardware and checks of each component for proper operation and adjustment as necessary.

Total Price for Labor and Materials: \$ 1,675.00

The above pricing is valid for 60 days. Current manufacturing lead time is 8-10 weeks.

Except as otherwise specified, all equipment supplied by Dominion Lock and Security shall be free from defects in material and workmanship for one year from installation or delivery.

Thank you for choosing Dominion Lock and Security for your security and door hardware needs. If you have any questions or I can be of further assistance, please do not hesitate to contact me at your earliest convenience.



Autumn Care of Mechanicsville 7600 Autumn Park Way Mechanicsville, VA 23116 (804) 730-0009

To Whom It May Concern,

As of Friday September 13th, 2019, Dominion Lock and Security has scheduled and surveyed the following issues at Autumn Care of Mechanicsville:

1. Storage Room: Fire door damaged, and required to be replaced.

All material was processed for an estimate on 9/13/19. Due to the nature of the door construction it can take up to one (1) week for an estimate to process. Currently this door is at a 10 week manufacturers lead time.

Please feel free to contact Dominion Lock and Security with any questions or concerns at your earliest convenience.

Respectfully,

Michael Lyden
Dominion Lock and Security



Autumn Care of Mechanicsville 7600 Autumn Park Way Mechanicsville, VA 23116 (804) 730-0009

To Whom It May Concern,

December 18, 2019

As of Thursday September 26th, 2019, Dominion Lock and Security had scheduled the following repairs and maintenance to take place at Autumn Care of Mechanicsville:

- 1. Replace Storage Room Door with a new 3'8" x 6'8" Laminate Wood Door, 45 Min UL Rating, Factory Finished to match existing openings.
- 2. Installation of Smoke Seal at above opening

All material was ordered on October 1st, 2019 with a 9 to 11 week manufacturers lead time. This is the industry standard lead time for all manufacturers of laminate doors.

The above listed materials are scheduled to ship December 20th, 2019. As soon as this door arrives at our distributors facility we will schedule pick up and installation.

Based off the current shipping date our intention is to have this door installed no later than Friday January 3rd, 2019. We will provide any and all updates we receive on shipping and delivery.

Upon receipt of materials, installation will be promptly scheduled.

Please feel free to contact Dominion Lock and Security with any questions or concerns at your earliest convenience.

Respectfully,

Michael Lyden Dominion Lock and Security

(804) 746-1456 MLyden@dominionlock.com

> 8098 Mechanicsville Turnpike Mechanicsville, Virginia 23111 (804) 746-1456; Fax – 804-746-1561