

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

PRINTED: 11/08/2024
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 495134	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 11/06/2024
NAME OF PROVIDER OR SUPPLIER RIDGECREST MANOR NURSING & REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE 157 ROSS CARTER BOULEVARD DUFFIELD, VA 24244		
(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 Description of structure: The building is a one story with brick veneer extended care facility. It was constructed in 1988 and is Type II (000) construction. There is a total of five smoke compartments. Sprinkler status: Fully sprinklered (NFPA 13) An unannounced routine Life Safety Code survey was conducted 11/04/2024 in accordance with 42 Code of Federal Regulation, Part 483:90(a) Requirements for Long Term Care Facilities. The facility was surveyed for compliance using the LSC 2012 Existing regulations. The facility was in compliance with the Requirements for Participation Medicare and Medicaid.	K 000			
K 291 SS=D	Emergency Lighting CFR(s): NFPA 101 Emergency Lighting Emergency lighting of at least 1-1/2-hour duration is provided automatically in accordance with 7.9.18.2.9.1, 19.2.9.1 This REQUIREMENT is not met as evidenced by: Standard not met for emergency task lighting in/for the transfer switch Findings include: On 11/04/2024 between the hours of 2:30 PM and 4:30PM it was revealed by observation that 90 minute back up emergency task lighting was not present in service of/to the transfer switch. NFPA 99 6.4.2.2.3.2(4)a Director of maintenance was present during	K 291	Emergency lighting was identified to be missing on the transfer switch that needs to be ninety minutes continuous lighting when loss of power, that the light will illuminate. Community Maintenance Department corrected the issue and placed the lighting as appropriate. All Maintenance staff have been educated on Emergency lighting with the transfer switch. Audits of substantial compliance of use will be conducted until next QA meeting. Audit Results will be reviewed at the monthly QA committee meeting. Date of Compliance: 11/8/24		

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

TITLE

(X6) DATE

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 291	Continued From page 1 inspection.	K 291			
K 918 SS=D	<p>Electrical Systems - Essential Electric System</p> <p>Maintenance and Testing</p> <p>The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110.</p> <p>Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked, readily identifiable, and separate from normal power circuits. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations.</p> <p>6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70)</p>	K 918	<p>Four Hour Load Bank test had been conducted on 1/28/23, but appropriate paperwork was not at facility.</p> <p>Maintenance Director requested a copy from Nixon on 11/6/24 for the test documentation and received it on 11/12/24.</p> <p>All Maintenance staff have been educated on the Four Hour Load Bank Test. Audits of substantial compliance of use will be conducted until next QA meeting.</p> <p>Audit Results will be reviewed at the monthly QA committee meeting.</p> <p>Date of Compliance: 11/12/24</p>		

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K 918	Continued From page 2 This REQUIREMENT is not met as evidenced by: Standard not met for generator system testing. Findings include: On 11/04/2024 between the hours of 2:30 PM and 4:30PM it was revealed by observation that documentation showing load bank testing was not available. NFPA 99.6.4.4, 6.4.4.1.1.2, NFPA 110 8.1 and following. NFPA 8.3.1* Director of maintenance was present during inspection.	K 918			
K 921 SS=D	Electrical Equipment - Testing and Maintenance CFR(s): NFPA 101 Electrical Equipment - Testing and Maintenance Requirements The physical integrity, resistance, leakage current, and touch current tests for fixed and portable patient-care related electrical equipment (PCREE) is performed as required in 10.3. Testing intervals are established with policies and protocols. All PCREE used in patient care rooms is tested in accordance with 10.3.5.4 or 10.3.6 before being put into service and after any repair or modification. Any system consisting of several electrical appliances demonstrates compliance with NFPA 99 as a complete system. Service manuals, instructions, and procedures provided by the manufacturer include information as required by 10.5.3.1.1 and are considered in the development of a program for electrical equipment maintenance. Electrical equipment instructions and maintenance manuals are readily available, and safety labels and condensed	K 921	Maintenance Director identified that we needed an additional copy of the generator operating manual at or in close proximity to the generator. The additional generator operating manual has been placed at the generator. All Maintenance staff have been educated on appropriate placement of generator instruction manual. Audits of substantial compliance of use will be conducted until next QA meeting. Audit Results will be reviewed at the monthly QA committee meeting. Date of Compliance: 11/14/24		

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K 921	<p>Continued From page 3</p> <p>operating instructions on the appliance are legible. A record of electrical equipment tests, repairs, and modifications is maintained for a period of time to demonstrate compliance in accordance with the facility's policy. Personnel responsible for the testing, maintenance and use of electrical appliances receive continuous training.</p> <p>10.3, 10.5.2.1, 10.5.2.1.2, 10.5.2.5, 10.5.3, 10.5.6, 10.5.8</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Standard not met for generator system operating manuals.</p> <p>Findings include:</p> <p>On 11/04/2024 between the hours of 2:30 PM and 4:30PM it was revealed by observation that the operating manual for the generator system was not present at, on or near the generator system.</p> <p>NFPA 110-8</p> <p>Director of maintenance was present for inspection.</p>	K 921			