

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

PRINTED: 06/30/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 055956	(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____	(X3) DATE SURVEY COMPLETED C 06/26/2017
NAME OF PROVIDER OR SUPPLIER BRIARWOOD POST ACUTE		STREET ADDRESS, CITY, STATE, ZIP CODE 5901 LEMON HILL AVE SACRAMENTO, CA 95824	
(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)
K 000	INITIAL COMMENTS The following reflects the findings of the California Department of Public Health, Life Safety Code Unit, during an abbreviated Life Safety Code Survey. Complaint Number: CA00540453 The inspection was limited to the specific complaint/entity reported incident investigated and does not represent the findings of a full inspection of the facility. Representing the California Department of Public Health: 29753 The complaint was substantiated with one regulatory violation. Census: 48 K 521 NFPA 101 HVAC SS=E HVAC Heating, ventilation, and air conditioning shall comply with 9.2 and shall be installed in accordance with the manufacturer's specifications. 18.5.2.1, 19.5.2.1, 9.2 This STANDARD is not met as evidenced by: Based on observation, document review, and interview, the facility failed to maintain the Heating, ventilation, and air conditioning (HVAC) units. This was evidenced by an air conditioning	K 000 JUL 12 2017 LIFE SAFETY CODE UNIT SAN BERNARDINO K 521	This Plan of Correction constitutes my written credible allegation of compliance for the deficiencies noted. Preparation and/or execution of this Plan of Correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth on the Statement of Deficiencies. This plan of Correction is prepared and/or executed solely because it is required by the provisions of the Health and Safety Code Section 1280 and 42 C.F.R. 483 et seq. K521 Staff were in-serviced to monitor all residents for signs of heat stroke, dehydration or heat exhaustion on 6/20/17 by the Director of Nurses. All residents had the potential to be affected. Cooling measuring were implement and all rooms were monitored.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Sacario

Administrator

7/12/17

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 required to continued program participation.

7/12/17 For Accepted by: Cynthia Lee, HRES

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K 521	<p>Continued From page 1</p> <p>(AC) unit that failed to function due to an electrical surge and resulted in a failed compressor. This resulted in a malfunction air conditioning system in the East Hallway.</p> <p>NFPA 101, Life Safety Code, 2012 Edition Chapter 19 Existing Health Care Facilities 19.1.1.1.3 General. The provisions of Chapter 4, General, shall apply.</p> <p>4.6.12 Maintenance, Inspection, and Testing.</p> <p>4.6.12.1 Whenever or wherever any device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or any other feature is required for compliance with the provisions of this Code, such device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or other feature shall thereafter be continuously maintained. Maintenance shall be provided in accordance with applicable NFPA requirements or requirements developed as part of a performance-based design, or as directed by the authority having jurisdiction.</p> <p>19.5 Building Services.</p> <p>19.5.2 Heating, Ventilating, and Air-Conditioning.</p> <p>19.5.2.1 Heating, ventilating, and air-conditioning shall comply with the provisions of Section 9.2. and shall be installed in accordance with the manufacturer's specifications, unless otherwise modified by 19.5.2.2.</p> <p>Chapter 9 Building Service and Fire Protection Equipment</p> <p>9.2 Heating, Ventilating, and Air-Conditioning.</p> <p>9.2.1 Air-Conditioning, Heating, Ventilating Ductwork, and Related Equipment.</p> <p>Air-conditioning, heating, ventilating ductwork, and related equipment shall be in accordance</p>	K 521	<p>On 6/22/17, the AC repair contractor explained that the part would take 2 weeks to arrive, so the facility rented three swamp coolers and continued monitoring residents and resident room temperatures. On 6/23/17, the facility rented an additional swamp cooler.</p> <p>Residents and resident rooms continued to be monitored. Cooling measures continued to be utilized throughout the duration of the one unit being failing to function properly.</p> <p>On 7/11/17, The repair was completed. The AC unit is up and functioning properly.</p> <p>The surge protectors have been ordered and all AC units will be fitted with surge protectors as soon as they arrive.</p> <p>CALIFORNIA DEPARTMENT OF PUBLIC HEALTH LICENSING & CERTIFICATION PROGRAM JUL 12 2017 LIFE SAFETY CODE UNIT</p>

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K 521	<p>Continued From page 2</p> <p>with NFPA 90A, Standard for the Installation of Air-Conditioning and Ventilating Systems, or NFPA 90B, Standard for the Installation of Warm Air Heating and Air-Conditioning Systems, as applicable, unless such installations are approved existing installations, which shall be permitted to be continued in service.</p> <p>NFPA 90A, Standard for the Installation of Air-Conditioning and Ventilating Systems, 2012 edition</p> <p>4.1. General Requirements for Equipment.</p> <p>4.1.2 Equipment shall be selected and installed based on its application with respect to the manufacturer's installation instructions and listing, as applicable.</p> <p>4.2.4.1 Installation.</p> <p>4.2.4.1.1 Heating and cooling equipment shall be installed in accordance with the applicable NFPA standards and the manufacturer's instructions.</p> <p>Findings:</p> <p>During an onsite visit to investigate a complaint regarding HVAC system on 6/21/17, the AC units were observed, documents were requested, and staff were interview.</p> <p>On 6/21/17 at 2:12 p.m., Administrative Staff 1 stated that she was informed on 6/18/17 that the AC unit had stopped working. During an interview at 2:15 p.m., Maintenance Staff 1 stated that the fuse in the AC unit went out on 6/19/17, and it was replaced on the same day.</p> <p>Maintenance Staff 1 further stated on 6/20/17 at 11:30 a.m., the compressor on the AC unit that served the East Hallway had stopped working. Maintenance Staff 1 indicated that no AC</p>	K 521		

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
LICENSING CENTER PROGRAM

JUL 12 2017

LIFE SAFETY CODE UNIT
SAN BERNARDINO

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CENTERS FOR MEDICARE & MEDICAID SERVICES

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K 521	<p>Continued From page 3</p> <p>company was available for service. The facility brought in three swamp coolers.</p> <p>During an interview on 6/21/17 at 2:30 p.m., Vendor 1 stated that the compressor had failed due to an electrical surge on one of four AC units. He further indicated that it needs to be replaced along with other smaller items.</p> <p>During a telephone call on 6/22/17 at 1:28 p.m., Administrative Staff 2 stated that one additional swamp cooler was brought in.</p> <p>At 2:40 p.m., the record titled, "HVAC Repairs" dated 6/22/17 indicated, "during a recent visit to the facility, the service technician found that all 4 units should have a surge protector wired into the units. The Goodman unit servicing the Nursing Station has a failed compressor. The warranty (factory parts warranty only) compressor, moxle plug, contactor, capacitor and condenser fan motor need to be replaced in order to restore the system to proper working conditions. The system is down at this time."</p>	K 521	<p>CALIFORNIA DEPARTMENT OF PUBLIC HEALTH LICENSING DIVISION</p> <p>JUL 12 2017</p> <p>DEPARTMENT OF HEALTH LICENSING DIVISION</p>	