STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255333	A. BUILDING **01 - GEORGE REGIONAL HEALTH AND REHABILITATION** B. WING _____	**09/15/2021**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GEORGE REGIONAL HEALTH & REHAB CENTER	**859 WINTER ST LUCEDALE, MS 39452**

(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 42 CFR 483.70(a) The facility must meet the applicable provisions of the 2012 (existing) Edition of the Life Safety Code (LSC) of the National Fire Protection Association (NFPA) ...	K 000		
K 353 SS=F	Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by: Based on the observation and document review, the facility failed to meet Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection System components as required by NFPA 25, section 5.2.1. The deficient practice had potential to affect the entire facility on the day of survey.	K 353	1. The Director of Maintenance contacted the sprinkler inspections contractor, Johnson Controls, to set up the earliest date for them to inspect our fire sprinkler system. The earliest date they could come was 09/28/2021 2. The Director of Maintenance performed	9/23/21

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

Electronically Signed | 12/15/2021

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	255333	A. BUILDING **01 - GEORGE REGIONAL HEALTH AND REHABILITATION** B. WING _____	**09/15/2021**

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K 353	Continued From page 1 Findings Include: On 9/15/21 at 1:15 AM, observation and documentation revealed the facility was unable to provide the documentation of the annual and quarterly tests for the fire sprinkler system for the present year (2021). The finding was acknowledged by the Administrator and Maintenance Supervisor verified this observation during the exit interview on 9/15/21	K 353	an in-service with lead Maintenance personnel on 09/06/2021 informing them of implementing sprinkler inspections every January. 3.The Director of Maintenance contracted Southern Fire Sprinkler Company to come out and inspect the fire sprinkler system in its entirety yearly in January. Date the Sprinkler was last Checked was 09/23/2021 Johnson Controls performed this system testing. City of Lucedale Water Department is the water supply source.	