

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

PRINTED: 04/28/2025
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 105817	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN FED B. WING _____	(X3) DATE SURVEY COMPLETED 04/01/2025
NAME OF PROVIDER OR SUPPLIER PLYMOUTH HARBOR INCORPORATED			STREET ADDRESS, CITY, STATE, ZIP CODE 700 JOHN RINGLING BLVD SARASOTA, FL 34236	
(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	<p>INITIAL COMMENTS</p> <p>An unannounced Fire & Life Safety recertification survey was conducted on 4/1/25 at Plymouth Harbour Incorporated, a skilled nursing facility in Sarasota, Florida.</p> <p>Plymouth Harbour Incorporated is not in compliance with the Code of Federal Regulations (CFR) 42, Section 483.90(a)&(b), Physical Environment Requirements for Long-Term Care Facilities and the National Fire Protection Association (NFPA) 101 (2012 edition) Life Safety Code.</p> <p>Initial Plan Review: 1988 Existing NFPA 220 Construction Type: II (111) Number of beds: 60 Census: 50</p> <p>The following is the description of the noncompliance.</p>	K 000		
K 345 SS=D	<p>Fire Alarm System - Testing and Maintenance CFR(s): NFPA 101</p> <p>Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available.</p> <p>9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72 This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the facility failed to test fire alarm interface equipment</p>	K 345	<p>1. Corrective Action for Cited Instance: On April 5, 2025, the facility contracted</p>	4/27/25

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

TITLE

(X6) DATE

Electronically Signed

04/23/2025

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 345	Continued From page 1 in accordance with NFPA 72. This in the event of a fire could result in the smoke detection devices failing to operate as designed thereby endangering the occupants of the building. This affects all smoke compartments of the building. The findings included: On 4/1/25 at 10:55 a.m. while reviewing the facility fire alarm inspection reports, the reports did not include results for the differential pressure testing of the duct smoke detectors. During the review, the Maintenance Director stated that the testing was "not done." Differential pressure testing of tube type duct detectors is a requirement of NFPA 72 (2010 edition) Table 14.4.2.2-14 (g)(6). NFPA 101(2012 edition) 19.5.2.1, 9.2, NFPA 72 (2010 edition) Table 14.4.2.2-14(g)(6)	K 345	with our life safety vendor to perform differential pressure testing of all duct-type smoke detectors. This testing was completed by a certified technician on April 21, 2025. 2. Systemic Correction: A full audit of our fire alarm inspection program was completed to ensure all NFPA-required elements are included in annual inspection contracts and vendor documentation. The scope of service was updated and reviewed with the contractor on April 15, 2025. 3. Education: The Maintenance Director and backup technician were trained on NFPA 70 and NFPA 72 testing standards on April 7, 2025. 4. Ongoing Monitoring: A quarterly audit of fire alarm system documentation will be conducted by the Environmental Services Manager to ensure compliance. 5. Quality Assurance: Results and findings will be reported to the QA Committee monthly for six months, beginning April 2025, for review and revision recommendations. Completion Date: April 27, 2025	
K 918 SS=D	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Maintenance and Testing 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.	K 918		4/27/25

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K 918	<p>Continued From page 2</p> <p>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> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on record review and interview, the facility failed to provide triennial testing of the emergency generator. This in the event of a power failure could result in the generator malfunctioning with a resulting loss of power to the facility. This affects the entire facility.</p> <p>The findings included: On 4/1/25 at 10:30 a.m. while reviewing the facility generator maintenance and testing records, no current evidence of triennial load</p>	K 918	<p>1. Corrective Action for Cited Instance: The facility immediately scheduled the required 4-hour triennial load test, which was conducted and completed on May 2nd, 2025, and followed with an amendment signed 04-09-2025 to the current contract for a 4-hour load bank every three years and two-hour load bank to comply ordinance by a licensed contractor in accordance with NFPA 110 Section 8.4.2.</p>	

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K 918	Continued From page 3 testing was found. The most current record was dated 9/30/21. On 4/1/25 at 10:36 a.m. concurrent with the review, the Maintenance Director acknowledged the findings. NFPA 110 (2010 edition) 8.4.2	K 918	2. Systemic Correction: A compliance calendar has been implemented to track future due dates for generator testing, inspections, and maintenance. 3. Education: The Maintenance Director received updated training on generator testing frequency requirements per NFPA 110 and NFPA 111 on April 7, 2025. 4. Ongoing Monitoring: All generator test logs, and vendor documentation will be reviewed quarterly led by the Director of Maintenance or designee. 5. Quality Assurance: Generator compliance will be tracked and reported to the QA Committee monthly starting April 2025 to ensure continued adherence and oversight. Completion Date: April 27, 2025	

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E 000	<p>Initial Comments</p> <p>During the Fire & Life Safety recertification survey conducted on 4/1/25 at Plymouth Harbour Incorporated, a skilled nursing facility, Emergency Preparedness regulations were reviewed.</p> <p>Plymouth Harbour Incorporated is in compliance with the Code of Federal Regulations (CFR) 42, Section 483.73, Emergency Preparedness Requirement for Long-Term Care (LTC) Facilities.</p>	E 000			

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K 000	<p>INITIAL COMMENTS</p> <p>An unannounced Fire & Life Safety relicensure survey was conducted on 4/1/25 at Plymouth Harbour Incorporated, a skilled nursing facility in Sarasota, Florida.</p> <p>This survey was completed in accordance with National Fire Protection Association (NFPA) 1 and 101 (2018 Edition) and applicable requirements of Florida State Fire Marshal's Rules and Regulations, Florida Administrative Code (F.A.C) 69A-3, F.A.C. 69A-53, F.A.C. 59A-4, and Florida Statutes (F.S.) 400 Part II, and F.S. 633.0215, adopting NFPA 1 and 101 (2018 Edition) known as the Florida Fire Prevention Code and all NFPA referenced standards and requirements adopted per NFPA 101, Chapter 2.</p> <p>The following is the description of the deficiencies.</p>	K 000		
K 345 SS=D	<p>NFPA 101 Fire Alarm System - Testing and Maintenance</p> <p>Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available. 9.6.5, 9.6.7, 9.6.8, and NFPA 70, NFPA 72</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to test fire alarm interface equipment in accordance with NFPA 72. This in the event of a fire could result in the smoke detection devices failing to operate as designed thereby</p>	K 345	<p>1. Corrective Action for Cited Instance: On April 5, 2025, the facility contracted with our life safety vendor to perform differential pressure testing of all duct-type smoke detectors. This testing was</p>	4/27/25

AHCA Form 3020-0001

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K 345	Continued From page 1 endangering the occupants of the building. On 4/1/25 at 10:55 a.m. while reviewing the facility fire alarm inspection reports, the reports did not include results for the differential pressure testing of the duct smoke detectors. During the review, the Maintenance Director stated that the testing was "not done." Differential pressure testing of tube type duct detectors is a requirement of NFPA 72. NFPA 101 (2018 edition) 19.5.2.1, 9.2, NFPA 72 (2016 edition) Table 14.4.3.2.17 (g)(5) Class III	K 345	completed by a certified technician on April 21, 2025. 2. Systemic Correction: A full audit of our fire alarm inspection program was completed to ensure all NFPA-required elements are included in annual inspection contracts and vendor documentation. The scope of service was updated and reviewed with the contractor on April 15, 2025. 3. Education: The Maintenance Director and backup technician were trained on NFPA 70 and NFPA 72 testing standards on April 7, 2025. 4. Ongoing Monitoring: A quarterly audit of fire alarm system documentation will be conducted by the Environmental Services Manager to ensure compliance. 5. Quality Assurance: Results and findings will be reported to the QA Committee monthly for six months, beginning April 2025, for review and revision recommendations. Completion Date: April 27, 2025	
K 918 SS=D	NFPA 99 Electrical Systems - Essential Electric Syste Electrical Systems - Essential Electric System Maintenance and Testing 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.	K 918		4/27/25

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K 918	<p>Continued From page 2</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 and readily identifiable. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70)</p> <p>This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide triennial testing of the emergency generator. This in the event of a power failure could result in the generator malfunctioning with a resulting loss of power to the facility. This affects the entire facility.</p> <p>The findings included: On 4/1/25 at 10:30 a.m. while reviewing the facility generator maintenance and testing records, no current evidence of triennial load testing was found. The most current record was dated 9/30/21.</p> <p>On 4/1/25 at 10:36 a.m. concurrent with the review, the Maintenance Director acknowledged</p>	K 918	<p>1. Corrective Action for Cited Instance: The facility immediately scheduled the required 4-hour triennial load test, which was conducted and completed on May 2nd, 2025, and followed with an amendment signed 04-09-2025 to the current contract for a 4-hour load bank every three years and two-hour load bank to comply ordinance by a licensed contractor in accordance with NFPA 110 Section 8.4.2.</p> <p>2. Systemic Correction: A compliance calendar has been implemented to track future due dates for generator testing, inspections, and maintenance.</p> <p>3. Education: The Maintenance Director</p>	

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K 918	Continued From page 3 the findings. NFPA 110 (2018 Edition) 8.4.2 Class III	K 918	received updated training on generator testing frequency requirements per NFPA 110 and NFPA 111 on April 7, 2025. 4. Ongoing Monitoring: All generator test logs, and vendor documentation will be reviewed quarterly led by the Director of Maintenance or designee. 5. Quality Assurance: Generator compliance will be tracked and reported to the QA Committee monthly starting April 2025 to ensure continued adherence and oversight. Completion Date: April 27, 2025	