

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

PRINTED: 07/06/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355096		(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____		(X3) DATE SURVEY COMPLETED 07/19/2022	
NAME OF PROVIDER OR SUPPLIER ANETA PARKVIEW HEALTH CTR				STREET ADDRESS, CITY, STATE, ZIP CODE 113 5TH ST S ANETA, ND 58212			
(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
E 000	Initial Comments			E 000			
K 000	A recertification survey conducted on 07/19/2022 found Aneta Parkview Health Center in compliance with the requirements of 483.73 Long-Term Care Facilities Emergency Preparedness. INITIAL COMMENTS			K 000			
K 353 SS=F	This survey used the 2012 edition of NFPA 101, Life Safety Code, Chapter 19-Existing Health Care Occupancies and the 2012 edition of NFPA 99, Health Care Facilities Code in compliance with 42 CFR 483.70(a)(b). The findings that follow demonstrate noncompliance with these standards. The facility was located in a one-story building of Type V (000) construction and was protected by an automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. An addition of Type V (111) construction was attached to the northwest side of the existing building in 2014. 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 _____			K 353			9/2/22

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

TITLE

(X6) DATE

Electronically Signed

07/26/2022

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 353	Continued From page 1 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: Automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. The property owner or designated representative shall correct or repair deficiencies or impairments that are found during the inspection, test, and maintenance required by NFPA 25, Standard for the Inspection, Testing and Maintenance of Water-based Fire Protection Systems. 19.7.6, 4.6.12, NFPA 25, 4.1.4.1, 14.3.1(14) Dry pipe system size shall be such that initial water is discharged from the system test connection in not more than 60 seconds, starting at the normal air pressure on the system and at the time of fully opened inspection test connection. NFPA 13 7.2.3.2 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. Record review and interview with staff determined: 1) The internal inspection of piping of the automatic sprinkler system had not been			K 353	1)The sprinkler system will be maintained in a reliable operating condition. 2)All residents have the potential to be affected. 3)A new sprinkler pipe will be installed by Allied Fire. 4)The new sprinkler system will be inspected, tested, and maintained according to NFPA25 by Allied Fire. QA will be completed according to the NFPA25 by the Maintenance Director and reviewed by the QA Coordinatr.		

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K 353	Continued From page 2 conducted in the past five years. 2) The existing dry sprinkler system dry valve trip test took 342 seconds for water to discharge thru the inspector's test connection which is more than a 50 percent increase in the time it takes water to travel to the inspector's test connection from the time the valve trips during a full flow trip test of a dry pipe sprinkler system when compared to the original system acceptance test requirement of not more than 60 seconds. The outside vendor who performed the test indicated it failed due to corrosion obstructing the pipes and that the existing dry sprinkler system would need to have new pipes installed. Failure to inspect, test and maintain the automatic sprinkler system in accordance with NFPA 25 increases the risk of death or injury due to fire. The deficiency affected the complete automatic sprinkler system, which serves the entire facility.	K 353			
K 712 SS=D	Fire Drills CFR(s): NFPA 101 Fire Drills Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at expected and unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 19.7.1.4 through 19.7.1.7	K 712		9/2/22	

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K 712	Continued From page 3 This REQUIREMENT is not met as evidenced by: The facility failed to conduct fire drills as required. Fire drill records review determined the PM Shift fire drill conducted at 6:00 PM on 06/17/2022 did not include the use of the fire alarm. Failure to conduct fire drills as required increases the risk of death or injury due to fire. The deficiency affected one (1) of twelve (12) drills in the past year.	K 712	1)Fire drills will be conducted as required. 2)All residents have the potential to be affected. 3)Fire drills will be conducted as required, using audible alarms between 6AM and 9PM and a coded announcement will be used between 9PM and 6AM. 4)QA will be completed prior to the completion date, monthly X3, and quarterly X3. QA will be completed by the Safety Director. QA will be reviewed by the QA Coordinator.		