STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	8084	A. BUILDING: 01 - GOOD SAMARITAN SOCIETY 8. WING _____	02/02/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUGUSTA PLACE -A PROSPERA COMMUNIn	316 VERSAILLES AVE BISMARCK, ND 58503

(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)	(XS) COMPLETE DATE
K 000	INITIAL COMMENTS This survey used the 2012 edition of NFPA 101, Life Safety Code, Chapter 33 Existing Residential Board and Care Occupancies (Large), in compliance with NDAC 33-03-24.2. The findings that follow demonstrate noncompliance with these standards. The facility was located in a two-story building of Type V (111) construction that was protected by an automatic sprinkler system designed to meet the requirements of NFPA 13R Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height. The building was separated from the nursing home by an occupancy separation wall having a two-hour fire resistance rating. The lower floor was basic care and the main floor was assisted living. The center core area of the main floor was surveyed to the one-hour fire resistance barriers in the east and west wings. Resident evaluation determined a Prompt level of evacuation difficulty. The E-Score was 1.5.	K000		
K 244	Emergency Egress and Relocation Drills Emergency Egress and Relocation Drills. Emergency egress and relocation drills shall be conducted in accordance with 33.7.3.1 through 33.7.3.6. 33.7.3 This State Licensing Rule is not met as evidenced by: Fire drills must be held monthly with a minimum of twelve drills per year, alternating with all work shifts. Residents and staff, as a group, shall	K244	K 244 Emergency Egress and Relocation Drills The corrective action for K244 is that an annual evacuation fire drill will be completed annually per North Dakota Century Code Chapter 23-09.3 and North Dakota Administrative Code Chapter 33-03-24.2, and the 2012 edition of NFPA 101, Life Safety Code, Chapter 33 Existing Residential Board and Care Occupancies {Large), in compliance with NDAC 33-03-24.2. All Basic Care residents located in the two-story building of Type V (111) construction have the potential to be affected. Measures put into place and systemic changes made to ensure that the deficient practice will not reoccur. The fire drill tracking system has been modified to include annual fire drill evacuation to reminders 30, 60 and 90 days prior to due date with the environmental services director responsible for maintaining the tracking system and timely completion of annual fire drill evacuation with oversight from the Administrator. Department heads, to include the environmental services director and maintenance staff will be educated on compliance with K244, Emergency Egress and Relocation drills - annual evacuation fire drill by the Administrator/ QAPI Coordinator.	

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

Administrator | 2/13/2026

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	8084	A. BUILDING: 01 - GOOD **SAMARITAN** SOCIETY B. WING _____	**02/02/2026**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUGUSTA PLACE - A PROSPERA COMMUNIn	**316 VERSAILLES AVE** **BISMARCK, ND 58503**

(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)	(XS) COMPLETE DATE
K 244	Continued From page 1 either evacuate the building or relocate to an assembly point identified in the fire evacuation plan. At least once a year, a fire drill must be conducted during which all staff and residents evacuate the building. Written records of fire drills must be maintained. These records must include dates, times, duration, names of staff and residents participating and those absent and why, and a brief description of the drill, including the escape path used and evidence of simulation of a call to the fire department. Each resident shall receive an individual fire drill walk-through within five days of admission. Any variation to compliance with the fire safety requirements must be approved in writing by the department. Residents of facilities meeting a greater level of fire safety must meet the fire drill requirements of that occupancy classification. 4.7.4, NDAC 33-03-24.2-08. The facility failed to conduct fire drills as required. Fire drill records review determined no fire drill was conducted where all residents and staff evacuated the building in the past year. Failure to conduct fire drills as required increases the risk of injury and death. The deficiency affected one (1) of twelve {12) required fire drills in the past year.	K244	Monitoring Plan • The Administrator (or designee) will audit fire drill documentation monthly x3 and then quarterly x4 to ensure timely completion of all required fire drills. • Audit results will be reviewed quarterly during QAPI meetings. • Any variance identified will be corrected immediately and addressed through additional staff education and process review. Completion date: 2/21/2026.	