North Dakota Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	8055	A. BUILDING: 01 - MAIN BUILDING 01 B. WING	11/20/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE TERRACE	901 E BOWEN AVE BISMARCK, ND 58504

(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) 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 requirements. The facility was located in a one-story building of Type V (000) construction that was fully sheathed and had a partial basement. The building was protected with a wet and dry automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. Based on resident evaluation, a Prompt level of evacuation difficulty was determined. E-score was 1.35.	K 000		
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 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.	K 244	The Corrective Action was accomplished when the Noverber Fire Drill was conducted on 11/25/2019. The Facility will follow Terrace policy to identify any potential of having a deficient practice ocur with Fire Drills.	

Health Resources Section
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Denise Tiggelaar — TITLE: Manager — (X6) DATE: 12-10-2019

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THE TERRACE	**901 E BOWEN AVE** **BISMARCK, ND 58504**

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K 244	Continued From page 1 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. NDAC 33-03-24.2-08. The facility failed to conduct fire drills as required. Fire drill records indicated the facility failed to conduct a fire drill on the second shift during the fourth quarter in the past year. 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) required fire drills in the past year.	K 244	Policy: Fire Drills will be held monthly with a minimum of twelve per year alternating with all work shifts. The measures put in place to ensure that the deficient practice will not recur: To pattern each quarter with alternating shifts. The Facility will monitor the corrective actions by using the "Fire Drill Shift Schedule Test Documentation Form".	