| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 355087 | A. BUILDING **01 - MAIN BUILDING 01**<br>B. WING _____ | **08/08/2017** |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| **WEDGEWOOD MANOR** | **804 MAIN ST W**<br>**CAVALIER, ND 58220** |

| (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 |
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| K 000 | INITIAL COMMENTS<br><br>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.<br><br>The facility was located in a one-story building of Type V (000) construction protected with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. | K 000 | | |
| K 347 SS=D | NFPA 101 Smoke Detection<br><br>Smoke Detection<br>2012 EXISTING<br>Smoke detection systems are provided in spaces open to corridors as required by 19.3.6.1.<br>19.3.4.5.2<br>This STANDARD is not met as evidenced by:<br>In spaces served by air-handling systems, detectors shall not be located where airflow prevents operation of the detectors. Detectors should not be located in a direct airflow or closer than 36 in. from an air supply diffuser or return air opening. 19.3.4.5.1, 9.6.2.10.1.1, NFPA 72 17.7.4.1, A.17.7.4.1<br><br>The facility failed to ensure the smoke detection system was in compliance with NFPA 72, National Fire Alarm and Signaling Code.<br><br>Observation determined smoke detectors in the following areas were installed within 36 in. of an air supply diffuser or return air opening: | K 347 | The facility will ensure it is in compliance with NFPA 72, smoke detectors are not to be located in a direct airflow nor closer than 3ft (1m) from an air supply diffuser or return air opening by:<br><br>1. Having a system in place that monitors compliance of installing smoke detectors at least 3ft away from air supply diffuser or return air opening. A facility wide assessment was done to determine whether other areas of the facility were affected.<br>2. A contractor was contracted and the smoke detectors were moved on 8/17/17 in all areas affected at least 3ft away from | 9/22/17 |

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

Electronically Signed | 08/21/2017

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| K 347 | Continued From page 1<br>1) The B Wing Day Room.<br>2) The Nurses Station.<br>3) The Med Room.<br><br>Failure to install the smoke detection system as required increases the risk of death or injury due to fire.<br><br>This deficiency affected three (3) of numerous smoke detectors in the facility. The smoke detection system serves the entire facility. | K 347 | the air supply diffuser or return air opening. Two other smoke detectors in the kitchen discovered by the facility assessment were moved in addition to the smoke detectors in the B wing day room, nurses□ station and Medication room.<br>3. Maintenance department will have an in-service on the functions and location of smoke detectors and requirements for maintenance. Requirements learned will help guide them in case of future replacement/installment of smoke detectors.<br>4. Maintenance staff shall report completion and result of inspection of smoke detectors to the quality assessment and performance committee. Outcomes shall be discussed during QA. | |
| K 351 SS=D | NFPA 101 Sprinkler System - Installation<br><br>Spinkler System - Installation<br>2012 EXISTING<br>Nursing homes, and hospitals where required by construction type, are protected throughout by an approved automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems.<br>In Type I and II construction, alternative protection measures are permitted to be substituted for sprinkler protection in specific areas where state or local regulations prohibit sprinklers.<br>In hospitals, sprinklers are not required in clothes closets of patient sleeping rooms where the area of the closet does not exceed 6 square feet and sprinkler coverage covers the closet footprint as required by NFPA 13, Standard for Installation of | K 351 | | 9/22/17 |

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| K 351 | Continued From page 2<br>Sprinkler Systems.<br>19.3.5.1, 19.3.5.2, 19.3.5.3, 19.3.5.4, 19.3.5.5, 19.4.2, 19.3.5.10, 9.7, 9.7.1.1(1)<br>This STANDARD is not met as evidenced by:<br>Buildings containing nursing homes shall be protected throughout by an approved, supervised automatic sprinkler system. 19.3.5.1, 9.7.1.1(1)<br><br>The facility failed to install the automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems to provide adequate coverage for all portions of the building.<br><br>Sprinklers in walk-in type coolers and freezers with automatic defrosting shall be of the intermediate-temperature classification or higher. NFPA 13 8.3.2, 8.3.2.5(10)<br><br>Observation determined one (1) sprinkler in the walk-in freezer located in the Kitchen was of ordinary-temperature classification. The walk-in freezer was equipped with an automatic defrosting feature.<br><br>Failure to install and maintain the automatic sprinkler system in accordance with NFPA 13 increases the risk of injury and death due to fire.<br><br>The deficiency affected one (1) of numerous sprinklers in the facility. The automatic sprinkler system serves the entire facility. | K 351 | The facility will ensure it is in compliance with NFPA 13, standard for the installation of Sprinkler Systems to provide adequate coverage for all portions of the building by:<br><br>1. Having a system in place that monitors functionality and compliance of intermediate-temperature classification sprinkler in the walk-in freezer.<br>2. A contractor has been scheduled to install an intermediate-temperature classification automatic sprinkler located in the kitchen.<br>3. Maintenance department will have an in-service on the function and location of intermediate-temperature classification automatic sprinkler. Daily audit will be carried out X 1 month, weekly X 3 months and monthly X 1 year to assure functionality. Audit will be included in the annual facility maintenance calendar.<br>4. Reports of installation and audit will be discussed during monthly QA. | |
| K 712<br>SS=F | NFPA 101 Fire Drills<br><br>Fire Drills<br>Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected | K 712 | | 9/22/17 |

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| K 712 | Continued From page 3<br>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. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms.<br>18.7.1.4 through 18.7.1.7, 19.7.1.4 through 19.7.1.7<br>This STANDARD is not met as evidenced by:<br>Drills shall be conducted quarterly on each shift to familiarize facility personnel with the signals and emergency action required under varied conditions. 19.7.1.6<br><br>The facility failed to conduct fire drills as required.<br><br>Fire drill records review determined no fire drills were conducted on the AM Shift during the second quarter of 2017.<br><br>Failure to conduct fire drills as required increases the risk of death or injury due to fire.<br><br>The deficiency affected one (1) of twelve (12) drills in the past year. | K 712 | It is the practice and policy of Wedgewood Manor to be in compliance with NFPA 101, fire drills are held at unexpected times under varying conditions, at least quarterly on each shift.<br><br>1. The facility shall put an audit process in place that assures drills are conducted quarterly on each shift. Audit will also ensure that drills are not repeated consecutively on the same shift.<br>2. AM drill was conducted on 8/17/17<br>3. Maintenance department will maintain a log that spells out what shift drill is due on a monthly basis for example August □ AM, September □ PM, October □ NOC, November □ AM, December - PM X 1 year. Facility maintenance personnel will also include audit in the annual facility maintenance calendar.<br>4. Documentations of audit will be submitted to the quality assessment/performance improvement committee and outcomes shall be discussed during QA. | |

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