

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

PRINTED: 02/09/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355087	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/30/2016
NAME OF PROVIDER OR SUPPLIER WEDGEWOOD MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 804 MAIN ST W 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
K 000	INITIAL COMMENTS This survey used the 2000 edition of NFPA 101, Life Safety Code, Chapter 19-Existing Health Care Occupancies in compliance with 42CFR 483.70(a). 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 protected by a wet automatic sprinkler system designed to meet the requirements of the 1999 edition of NFPA 13, Standard for the Installation of Sprinkler Systems.	K 000			
K 054 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD All required smoke detectors, including those activating door hold-open devices, are approved, maintained, inspected and tested in accordance with the manufacturer's specifications. 9.6.1.3 This STANDARD is not met as evidenced by: Smoke detectors are not be located in a direct airflow nor closer than 3 ft. (1 m) from an air supply diffuser or return air opening. NFPA 72 A-2-3.5.1 The facility failed to ensure smoke detectors were installed in accordance with NFPA 72, National Fire Alarm Code. Observation determined numerous smoke detectors throughout the building were located within three (3) feet of a supply or exhaust air diffuser. Failure to install smoke detectors in accordance with NFPA 72 increases the risk of death or injury due to fire.	K 054	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: 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. 2. A contractor has been scheduled to move the smoke detectors in all areas affected at least 3ft away from the air supply diffuser or return air opening. 3. Maintenance department will have an in-service on the functions and location of smoke detectors and requirements for maintenance. Requirements learned will		10/11/16

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

TITLE

(X6) DATE

Electronically Signed

09/08/2016

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 054	Continued From page 1 This deficiency affected numerous smoke detectors in the building.	K 054	help guide them in case of future replacement/installment of smoke detectors.	10/11/16	
K 144 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Generators inspected weekly and exercised under load for 30 minutes per month and shall be in accordance with NFPA 99 and NFPA 110. 3-4.4.1 and 8-4.2 (NFPA 99), Chapter 6 (NFPA 110) This STANDARD is not met as evidenced by: A remote annunciator, storage battery powered, shall be provided to operate outside of the generating room in a location readily observed by operating personnel at a regular work station. NFPA 99 3-4.1.1.15 The facility failed to ensure the emergency generator was in compliance with NFPA 99, Standard for Health Care Facilities. Observation determined there was no remote annunciator located outside of the Generator Room at a work site readily observable by personnel. Failure to ensure emergency generators are in compliance with NFPA 99 increases the risk of death or injury due to fire. The deficiency affected one (1) of one (1) emergency generator which provides all emergency power to the facility.	K 144	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. The facility will ensure it is in compliance with NFPA 99, a remote annunciator storage battery powered shall be provided to operate outside of the generating room in a location readily observed by operating personnel by: 1. Having a system in place that monitors functionality and compliance of remote annunciator. 2. A contractor has been scheduled to install a remote annunciator located outside of the generator room at work site readily observable by personnel. 3. Maintenance department will have an in-service on the function and location of remote annunciator. 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. 4. Reports of installation and audit will		

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K 144	Continued From page 2	K 144	be discussed during monthly QA.	10/11/16	
K 147 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment shall be in accordance with National Electrical Code. 9-1.2 (NFPA 99) 18.9.1, 19.9.1 This STANDARD is not met as evidenced by: When electrical hazards are identified, measures to abate such conditions shall be taken. Electrical wiring and equipment shall be in accordance with NFPA 70, National Electrical Code. 33.2.5.2, 9.1.2 NFPA 70, 517.20. No evidence was provided to indicate two (2) of two (2) electrical receptacles installed in the stainless steel sink and back slash adjacent to the sink in the Kitchen were (GFCI) protected. Failure to ensure the electrical wiring complies with NFPA 70 increases the risk of injury and death due to fire. The deficiency affected two (2) of numerous receptacles in the facility.	K 147	It is the practice and policy of Wedgewood Manor to be in compliance with NFPA 70, electrical wiring and equipment shall be in accordance with national electrical code. 1. The facility shall put an audit process in place that tests protection of electrical receptacles installed in the stainless steel sink and back slash adjacent to the sink in the kitchen. 2. An electrician has been contracted to protect receptacles. 3. Maintenance department will maintain a log that will test protection of receptacles daily X 1 month, weekly X 3 months and monthly X 1 year. Facility maintenance personnel will also include audit in the annual facility maintenance calendar. 4. Documentations of audit will be submitted to the quality assessment/performance improvement committee and outcomes shall be discussed during QA.		