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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355108	A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	08/07/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARYHILL MANOR	110 HILLCREST DR ENDERLIN, ND 58027

(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 42 CFR 483.70(a). The findings that follow demonstrate noncompliance with these requirements. The facility was located in a one-story building of Type V (111) construction with no basement. The facility was protected throughout by a wet/dry automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems.	K 000		
K 062 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5 This STANDARD is not met as evidenced by: Testing frequencies for automatic sprinkler systems range from quarterly to annually. Inspection frequencies can be as often as weekly to as long as annually. The frequencies for testing, inspection and maintenance of automatic sprinkler systems are dictated by the requirements as outlined by Table 5-1 of NFPA 25, Standard for the Inspection, Testing and Maintenance of Water-based Fire Protection Systems. NFPA 25 requires the facility to complete, maintain and make available to the authority having jurisdiction copies of records which indicate the procedure performed, by whom, the results and the date. These records	K 062	K-0062 1. SimplexGrinnell, the company contracted to do these quarterly inspections, was contacted immediately following the survey on Aug.7th. They assured us that they will be here quarterly to complete the inspections, as outlined in our agreement. 2. SimplexGrinnell was here on August 9th to complete a quarterly inspection. 3. The Support Services Coordinator will review the report from SimplexGrinnell thoroughly for completeness and will contact them to set up a date if they are not here within 14 weeks of their last quarterly inspection. 4. The Administrator will review the reports twice/year for completeness and timeliness.	08/09/13

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

Nancy Tomlan | CEO/Administrator | 9/3/13

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 062	Continued From page 1 are to be retained for the life of the system. The automatic sprinkler system is required to have specified maintenance. The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. Review of sprinkler records could not verify that quarterly flow alarm tests of the sprinkler system were conducted in the past twelve (12) months. Records indicated one (1) of four (4) quarterly flow alarm tests was completed on May 8, 2013 in conjunction with the annual test of the sprinkler system by the contracted fire sprinkler service company.	K 062	K-069 1. Nardini Fire Equipment Co., the company contracted to do these inspections, was contacted immediately following the survey on Aug.7th. They said the person doing the inspection was unable to complete the gas shut-off valve check in February because the oven was in use, but acknowledged that they should have come back to do it at a later time. They stated they will ensure the inspections are totally completed in the future. 2. A service technician from Nardini was here on August 9th to complete the inspection, including the shut-off valve for the gas fuel supply to the commercial cooking equipment. 3. The Support Services Coordinator will review the report from Nardini thoroughly for completeness and will contact them if there are any areas that are incomplete. 4. The Administrator will review the reports twice/year for completeness and timeliness.	08/09/13
K 069 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Cooking facilities are protected in accordance with 9.2.3. 19.3.2.6, NFPA 96 This STANDARD is not met as evidenced by: An inspection and servicing of the kitchen fire-extinguishing system and listed exhaust hoods containing a constant or fire-actuated water system must be made at least every 6 months by properly trained and qualified persons. All actuation components, including remote manual pull stations, mechanical or electrical devices, detectors, actuators, and fire-actuated dampers, must be checked for proper operation during the inspection in accordance with the manufacturer's listed procedures. The facility failed to ensure the kitchen automatic extinguishing system was inspected and	K 069		

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K 069	Continued From page 2 maintained in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. 19.3.2.6, 9.3 Records review determined the automatic gas shut-off for the gas fuel supply to the commercial cooking equipment was not tested during one (1) of the previous two (2) inspections by the service contractor. Records review indicated the gas shut-off valve was not tested during the 2/8/13 inspection.	K 069		