North Dakota Health and Human Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	8045	A. BUILDING: **01 - MAIN BUILDING 01** B. WING _____	**10/20/2025**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EVERGREENS OF FARGO	**1405 W GATEWAY CIRCLE FARGO, ND 58103**

(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 standards. The facility was located in a one-story building of Type V (000), fully sheathed construction and protected throughout with a wet automatic fire 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 attic space was protected with a heat detection system. Resident evaluation determined a Slow level of evacuation difficulty. The E-Score was 2.3.	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	K 244		

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

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K 244	Continued From page 1 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: 1) The Night Shift fire drill conducted at 5:19 AM on 11/08/2024 did not include the use of the fire alarm. 2) The Night Shift fire drill conducted at 4:16 AM on 12/04/2024 did not include the use of the fire alarm. 3) The Night Shift fire drill conducted at 6:00 AM on 04/18/2025 did not include the use of the fire alarm. 4) The Night Shift fire drill conducted at 6:00 AM on 06/03/2025 did not include the use of the fire alarm. 5) The Night Shift fire drill conducted at 6:00 AM on 09/22/2025 did not include the use of the fire alarm.	K 244		

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K 244	Continued From page 2 6) No fire drill was conducted on the AM Shift during the first quarter in the past year. 7) No fire drill was conducted on the PM Shift during the second quarter in the past year. 8) No fire drill was conducted on the PM Shift during the third quarter in the past year. 9) No fire drill was conducted on the Night Shift during the fourth quarter in the past year. 10) No fire drill was conducted during the month of July in the past year. Failure to conduct fire drills as required increases the risk of injury and death. The deficiency affected ten (10) of twelve (12) required fire drills in the past year.	K 244		

Ecumen Evergreens of Fargo Plan of Correction 11/4/2025

1. No residents were affected by the deficient code K244. Corrective action will be accomplished by scheduling and completing full fire alarm drills on all shifts, every month going forward.
2. All areas of the facility were affected equally. All residents have the potential to be effected by using the fire alarm during the night shift, but will not be affected otherwise.
3. The current policy is being reviewed/revised. We were not aware we could not make up missed fire alarms, if it was not in the same quarter. We will no longer switch days of a certain shifts fire alarms with another day to avoid missing any in a quarter. The fire alarm will be used on all shift going forward.
4. Environmental Supervisor will be responsible to monitor/audit that all test are done withing the correct month and that night shift fire alarms are set off. This will be effective immediately for November testing due as of 11/30/2025. Environmental Supervisor will be responsible for monitoring they are completed correctly monthly for 3 months, and then quarterly after that for one year. Results will be reported to Executive Director. If concerns are identified, immediate corrective action will be implemented. The Executive Director shall submit a report of the monitoring to the Safety committee during each monthly meeting.
5. Date of correction for Tag K244 is 11/30/2025.

Brett Busby

Executive Director