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
	8069	A. BUILDING: **01 - BUILDING 01** B. WING _____	**11/07/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TOUCHMARK AT HARWOOD GROVES	**1200 HARWOOD DR S** **FARGO, ND 58104**

(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 three-story building of Type V (111) construction with an automatic fire sprinkler system designed to meet NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height. Closets did not have sprinklers. The Touchmark at Harwood Groves basic care was located at the northwest corner of the first and second floors. Based on resident evaluation, a Slow level of evacuation difficulty was determined. E-Score was 2.25.	K 000	A new fire drill monitoring form and schedule will be created. The form will indicate the alternating shift designated for each month's fire drill. The fire drill record form will be amended to include a record of a simulation of a call to the fire department during each drill. This practice affects all Basic Care fire drills. The new schedule will ensure fire drills occur each month. A calendar reminder will be sent to both the Facility Manager and Building Manager to ensure compliance. Front Desk personnel will simulate a call to the Fire Department during each fire drill.	
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	K 244	The Facility Manager will provide education on the schedule and amended fire drill record to the Building Manager. The Facility Manager will also provide Front Desk personnel with training related to simulated calls. The Facility Manager will be responsible for ensuring compliance by checking the form monthly to ensure fire drills have occurred each month and include a simulated call to the fire department.	1-6-2018

Health Resources Section
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Exec. Director 11-22-17

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K 244	Continued From page 1 conducted during which all staff and residents 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. NDAC 33-03-24.2-08. The facility failed to conduct fire drills as required. Fire drill records indicated: 1) The facility failed to a conduct fire drill on the night shift during June of 2017. 2) Fire drill records indicated fire drills did not include the simulation of an emergency phone call to fire department. Failure to conduct fire drills as required increases the risk of death or injury due to fire. The deficiency affected all required fire drills in the past year.	K 244		
K 251	MANUAL FIRE ALARM General. A fire alarm system in accordance with Section 9.6 shall be provided, unless all of the	K 251		

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K 251	Continued From page 2 following conditions are met: (1) The facility has an evacuation capability of prompt or slow. (2) Each sleeping room has exterior exit access in accordance with 7.5.3. (3) The building does not exceed three stories in height. 33.3.3.4.1 This state licensing rule is not met as evidenced by: A fire alarm system in accordance with section 9.6 shall be provided. 33.3.3.4.1. A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with the applicable requirements of NFPA 70, National Electrical Code, and NFPA 72, National Fire Alarm and Signaling Code. 9.6.1.3. 2010 NFPA 72, 14.6.2.4, Figure 14.6.2.4 Section 7.12-7.14 and page 11 The facility failed to test the fire alarm system as required. Review of the 01/10/2017 fire alarm system annual test records indicated: 1) Audible/visible notification appliances were not tested. 2) Device test results (alarm initiating, supervisory alarm initiating, and notification) did not provide an itemized list with the device type, address,	K 251	The fire alarm system will be retested to include testing of audible/visible notification appliances and an itemized list of device type results with device type, address, location, and test results. This practice affects annual testing of the Basic Care facility's fire alarm system. To prevent this from occurring again, the electronic work order will be amended to include audible/visible notification appliance testing, along with device type results. The electronic work order will provide a reminder annually. Reports of completed tasks are generated through this system and will be monitored by the Facility Manager. The completed log will become part of the facility's Life Safety Code documentation binder.	1-6-2018

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K 251	Continued From page 3 location, and test result as required. Failure to test and maintain the fire alarm system in accordance with NFPA 72 increases the risk of death or injury due to fire. This deficiency affected numerous tests of the fire alarm system. The fire alarm system served the entire building.	K 251		
K 256	AUTOMATIC SPRINKLERS Where an automatic sprinkler system is installed, for either total or partial building coverage, the system shall be installed in accordance with Section 9.7, as modified by 33.3.3.5.1.1, 33.3.3.5.1.2, and 33.3.3.5.1.3. 33.3.3.5.1 This state licensing rule is not met as evidenced by: Where an automatic sprinkler system is installed, for either total or partial building coverage, the system shall be installed in accordance with section 9.7. 33.3.3.5.1 Automatic sprinkler systems are continuously	K 256		

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K 256	Continued From page 4 maintained in reliable operating condition and are inspected and tested periodically. The property owner or designated representative shall correct or repair deficiencies or impairments that are found during the inspection, test, and maintenance required by NFPA 25, Standard for the Inspection, Testing and Maintenance of Water-based Fire Protection Systems. NFPA 25 8.3.1, 8.3.2, 13.2.7.1, 13.3.2.1.1 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. 1) Diesel engine-driven fire pumps shall be operated weekly. Electric motor-driven fire pumps shall be operated monthly. A test of fire pump assemblies shall be conducted without flowing water. The test shall be conducted by starting the pump automatically. The electric pump shall run a minimum of 10 minutes. The diesel pump shall run a minimum of 30 minutes. A valve installed to open as a safety feature shall be permitted to discharge water. An automatic timer shall be permitted to be substituted for the starting procedure. Qualified operating personnel shall be in attendance whenever the pump is in operation. The pertinent visual observations or adjustments specified in the following checklists shall be conducted while the pump is running: (1) Pump system procedure as follows: (a) Record the system suction and discharge pressure gauge readings (b) Check the pump packing glands for slight discharge (c) Adjust gland nuts if necessary (d) Check for unusual noise or vibration (e) Check packing boxes, bearings, or pump casing for overheating	K 256	A churn test of the electric motor-driven fire pump and an inspection of the control valves and gauges of the automatic sprinkler system as required by NFPA 25 will occur. The facility has only one fire pump and sprinkler system. Monthly churn testing of the fire pump and inspection of automatic sprinkler system's control valves and gauges will be added to the facility's electronic preventative maintenance system. The system will provide a recurring monthly reminder. Reports of completed tasks are generated through this system and will be monitored by the Facility Manager. This completed log will become part of the facility's Life Safety Code documentation binder.	1-6-2018

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K 256	Continued From page 5 (f) Record the pump starting pressure (2) Electrical system procedure as follows: (a) Observe the time for motor to accelerate to full speed (b) Record the time controller is on first step (for reduced voltage or reduced current starting) (c) Record the time pump runs after starting (for automatic stop controllers) (3) Diesel engine system procedure as follows: (a) Observe the time for engine to crank (b) Observe the time for engine to reach running speed (c) Observe the engine oil pressure gauge, speed indicator, water, and oil temperature indicators periodically while engine is running (d) Record any abnormalities (e) Check the heat exchanger for cooling waterflow (4) Steam system procedure as follows: (a) Record the steam pressure gauge reading (b) Observe the time for turbine to reach running speed Record review and interview with staff determined the electric motor-driven fire pump was not tested monthly. 2) Record review and interview with staff determined the control valves and the gauges of the automatic sprinkler system had not been inspected monthly. Failure to inspect, test and maintain the automatic sprinkler system in accordance with NFPA 25 increases the risk of death or injury due to fire. This deficiency affected numerous inspections and tests of the automatic sprinkler system in the past year. The automatic sprinkler system serves the entire facility.	K 256		

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K 309	SMOKE DETECTION AND ALARM All living areas, as defined in 3.3.21.5, and all corridors shall be provided with smoke detectors that comply with NFPA 72, National Fire Alarm and Signaling Code, and are arranged to initiate an alarm that is audible in all sleeping areas, as modified by 33.3.3.4.8.2 and 33.3.3.4.8.3. 33.3.3.4.8.1 This state licensing rule is not met as evidenced by: 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. 33.3.3.4.7, 9.6.2.10.1.1, NFPA 72 17.7.4.1 The facility failed to ensure the smoke detection system was in compliance with NFPA 72, National Fire Alarm and Signaling Code. Observation determined smoke detectors throughout the facility were installed within 36 in. of an air supply diffuser or return air opening. Failure to install and test the smoke detection system as required increases the risk of death or injury due to fire. This deficiency affected numerous smoke detectors throughout the facility. The smoke	K 309	The smoke detectors identified within 36 inches from an air supply diffuser or return air opening during the LSC survey will be moved. A full inspection of the Basic Care facility will occur to identify any additional smoke detectors located within 36 inches of an air supply diffuser or return air opening. Any detectors identified will also be moved. Any additional rooms added to Basic Care in the future will be checked for similar obstruction prior to application for licensure or a request for change in licensure. The Facility Manager will be responsible for compliance.	1-6-2018

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K 309	Continued From page 7 detection system serves the entire facility.	K 309	The emergency generator monthly test will include verification of generator load to at least 30 percent of the nameplate rating of 150 kW. The battery-powered emergency lighting at the generator will be visually inspected and tested for 1.5 hours. There is only one emergency generator in the facility and one battery-powered emergency light at the generator site. To prevent reoccurrence, the preventative maintenance electronic work order will be amended to include verification of the required generator load. A monthly 30-second test and inspection of the battery-powered emergency lighting near the generator will be added to the preventative maintenance electronic work order system, along with a 1.5 hour annual test of the battery-powered emergency light.	
K2130	Other LSC Deficiencies Other Life Safety Code deficiencies: This state licensing rule is not met as evidenced by: Emergency lighting in accordance with Section 7.9 shall be provided in all facilities meeting any of the following criteria: (a) Facilities having an impractical evacuation capability. (b) Facilities having a prompt or slow evacuation capability with more than 25 rooms, unless each room has a direct exit to the outside of the building at the finished ground level. 33.3.2.9 1) Emergency generators providing power to emergency lighting systems shall be installed, tested, and maintained in accordance with NFPA 110, Standard for Emergency and Standby Power Systems. 7.9.2.4 Generator sets shall be tested 12 times a year, with testing intervals of not less than 20 days nor more than 40 days. Generator sets serving essential electrical systems shall be tested in accordance with NFPA 110, Standard for Emergency and Standby Power Systems. EPSSs, including all appurtenant components, shall be inspected weekly and exercised under load at least monthly. Diesel generator sets in	K2130		

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K2130	Continued From page 8 service shall be exercised at least once monthly, for a minimum of 30 minutes, using one of the following methods: (1) Loading that maintains the minimum exhaust gas temperatures as recommended by the manufacturer. (2) Under operating temperature conditions and at not less than 30 percent of the EPS nameplate kW rating. Diesel-powered EPS installations that do not meet the requirements shall be exercised monthly with the available EPSS load and shall be exercised annually with supplemental loads at not less than 50 percent of the EPS nameplate kW rating for 30 continuous minutes and at not less than 75 percent of the EPS nameplate kW rating for 1 continuous hour for a total test duration of not less than 1.5 continuous hours. NFPA 110 8.4.1, 8.4.2, 8.4.2.3 The facility failed to ensure the emergency generator was in compliance with NFPA 110. Review of generator test records did not indicate that the minimum exhaust temperature provided by the manufacturer was achieved and that the monthly exercise of the diesel generator loaded the generator to at least 30 percent (45 kW) of the nameplate rating. The nameplate rating of the generator was 150 kW. The facility did not perform annual supplemental load exercises as required when diesel generators are not loaded to 30 percent of nameplate rating or manufacturer's recommended temperature is achieved during the required monthly exercises.	K2130	The electronic work order will provide a recurring monthly reminder of these tasks and an annual reminder of the 1.5 hour test. Reports of completed tasks are generated through this system and will be monitored by the Facility Manager. This completed log will become part of the facility's Life Safety Code documentation binder.	1-6-2018

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K2130	Continued From page 9 Failure to inspect and maintain emergency generators in accordance with NFPA 110 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. 2) Emergency illumination shall be provided for not less than 1½ hours in the event of failure of normal lighting. 7.9.2.1 Testing of required emergency lighting systems shall be permitted to be conducted as follows: (1) Functional testing shall be conducted monthly, with a minimum of 3 weeks and a maximum of 5 weeks between tests, for not less than 30 seconds. (2) The test interval shall be permitted to be extended beyond 30 days with the approval of the authority having jurisdiction. (3) Functional testing shall be conducted annually for a minimum of 1½ hours if the emergency lighting system is battery powered. (4) The emergency lighting equipment shall be fully operational for the duration of the tests. (5) Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction. 7.9.3.1.1 Records review determined monthly testing of the emergency battery-powered lighting at the generator location was not documented. The facility failed to ensure the emergency lighting was in proper operating condition to provide 1½ hours of emergency illumination in the	K2130		

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K2130	Continued From page 10 event of failure of normal lighting. Failure to test and maintain the emergency lights in accordance with NFPA 101 increases the risk of death or injury due to fire. The deficiency affected one (1) of one (1) emergency battery back-up light in the facility.	K2130		