STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355112	(X2) MULTIPLE CONSTRUCTION A. BUILDING **01 - MAIN BUILD...** B. WING	(X3) DATE SURVEY COMPLETED **04/06/2026**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODSIDE VILLAGE	**4000 24TH AVE S , GRAND FORKS, North Dakota, 58201**

(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
K0000 Bldg. 01	INITIAL COMMENTS This survey used the 2012 edition of NFPA 101, Life Safety Code, Chapter 18-New Health Care Occupancies, 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. The facility was located in a two-story building of Type I (332) construction. Attached to the facility and separated with an occupancy separation having a two-hour fire resistance rating was a one-story ancillary Commons Building, along with an assisted living unit to the north, and an independent living apartment building to the east. The Commons Building (Towne Square) housed service areas for the nursing facility to include dietary, auditorium, chapel, beauty shop, and exercise/game room. The Commons Building was of Type V (000) construction. An addition of Type II (111) construction was attached to the southwest side of the existing facility in 2018. The addition was surveyed using Chapter 18 of the Life Safety Code. The nursing facility and the Commons Building were protected with a wet/dry automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems.	K0000		04/10/2026
K0921 SS = F Bldg. 01	Electrical Equipment - Testing and Maintenanc CFR(s): NFPA 101 Electrical Equipment - Testing and Maintenance Requirements The physical integrity, resistance, leakage current, and touch current tests for fixed and portable patient-care related electrical equipment (PCREE) is performed as required in 10.3. Testing intervals are established with policies and protocols. All PCREE used in patient care rooms is tested in accordance	K0921	All patient-care related electrical equipment currently in use has been identified and is being tested to ensure compliance with NFPA 99 requirements. A complete inventory of all PCREE was conducted across all departments. Maintenance staff initiated inspection and electrical safety testing of all identified equipment.	05/21/2026

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 reverse for further 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.

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

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K0921 SS = F Bldg. 01	Continued from page 1 with 10.3.5.4 or 10.3.6 before being put into service and after any repair or modification. Any system consisting of several electrical appliances demonstrates compliance with NFPA 99 as a complete system. Service manuals, instructions, and procedures provided by the manufacturer include information as required by 10.5.3.1.1 and are considered in the development of a program for electrical equipment maintenance. Electrical equipment instructions and maintenance manuals are readily available, and safety labels and condensed operating instructions on the appliance are legible. A record of electrical equipment tests, repairs, and modifications is maintained for a period of time to demonstrate compliance in accordance with the facility's policy. Personnel responsible for the testing, maintenance and use of electrical appliances receive continuous training. 10.3, 10.5.2.1, 10.5.2.1.2, 10.5.2.5, 10.5.3, 10.5.6, 10.5.8 This STANDARD is NOT MET as evidenced by: The facility failed to test all Patient-Care Related Electrical Equipment (PCREE) in use throughout the facility. Record review and interview with staff determined testing of all Patient-Care Related Electrical Equipment in use throughout the facility was not completed, as required by NFPA 99, Health Care Facilities Code. Failure to inspect, test and maintain Patient-Care Related Electrical Equipment (PCREE) in accordance with NFPA 99 increases the risk of death or injury due to fire. The deficiency affected numerous items of Patient-Care Related Electrical Equipment in use throughout the facility.	K0921	Continued from page 1 Any equipment found to be non-compliant or unsafe will immediately be removed from service until repaired, replaced, and retested. Documentation of completed testing, including date and results, will be maintained. The facility recognizes that this issue has the potential to affect all departments utilizing PCREE. A facility-wide audit was conducted beginning on 04.13.2026 to ensure no patient-care equipment was omitted. The facility has implemented the following measures to ensure ongoing compliance: Developed and implemented a PCREE management program consistent with NFPA 99. Established a master equipment inventory log. Implemented a preventive maintenance schedule to ensure timely inspection and testing. To ensure sustained compliance: Monthly audits of a sample of PCREE will be conducted for six consecutive months to verify testing is current. Results of the audits will be submitted monthly to the Safety Leadership Committee. Any deficiencies identified during audits will be corrected immediately. The facility expects full compliance by May 21, 2026.	05/21/2026

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E0000	Initial Comments A recertification survey conducted on 04/06/2026 found Woodside Village in compliance with the requirements of 483.73 Long-Term Care Facilities Emergency Preparedness.	E0000		04/10/2026

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