STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355037	A. BUILDING **02 - MAIN BUILDING 02** B. WING _____	**07/22/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ST ALOISIUS MEDICAL CENTER NURSING HOME	**325 E BREWSTER ST** **HARVEY, ND 58341**

(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 2012 edition of NFPA 101, Life Safety Code, 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 one-story building of Type II (000) construction with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. The St. Aloisius Hospital was attached to the nursing facility with two-hour fire-rated barriers at the west and south side of Unit A and at the north side of Unit B. An independent living unit was attached to the southeast side of Unit B and was separated from the nursing facility by an occupancy separation wall having a two-hour fire resistance rating. The partial basement of Unit B was separated from the main floor with a two-hour floor/ceiling assembly and two-hour rated vertical shafts.	K 000		
K 353 SS=F	Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are	K 353		8/30/19

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

Electronically Signed | 07/29/2019

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355037	A. BUILDING **02 - MAIN BUILDING 02** B. WING _____	**07/22/2019**

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K 353	Continued From page 1 maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by: Automatic sprinkler systems are continuously 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. 19.7.6, 4.6.12, NFPA 25, 4.1.4.1 All backflow preventers installed in fire protection system piping shall be tested annually by conducting a forward flow test of the system at the designed flow rate, including hose stream demand, where hydrants or inside hose stations are located downstream of the backflow preventer. NFPA 25, 13.6.2.1 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25.	K 353	1. No residents were directly affected by this deficiency. 2. All residents have the potential to be affected by the failure of the backflow preventer. 3. The backflow preventer will be tested by a qualified service technician to insurance the backflow preventer is in reliable operating condition. 4. The Environmental Services Manager or his designee will conduct monthly ongoing QI monitoring to assure that the backflow preventer testing is concurrent. This monitor will continue monthly for six months and then annually in the month of August. 5. Completion date August 30, 2019.	

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K 353	Continued From page 2 Record review determined no annual back flow preventer test was conducted in the past year. 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. The deficiency affected the complete automatic sprinkler system, which serves the entire facility.	K 353		
K 511 SS=F	Utilities - Gas and Electric CFR(s): NFPA 101 Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2 This REQUIREMENT is not met as evidenced by: Ground-fault circuit-interruption for personnel shall be provided as required. The ground-fault circuit-interrupter shall be installed in a readily accessible location. All 125-volt, single-phase, 15- and 20-ampere receptacles located in bathrooms, kitchens and where receptacles are installed within 6 ft. of the outside edge of the sink shall have ground-fault circuit-interrupter protection for personnel. 19.5.1.1, 9.1.2, NFPA 70, 210.8, 210.8(B)(1), 210.8(B)(2), 210.8(B)(5)	K 511	1. No residents were directly affected by this deficiency. 2. All residents have the potential to be affected by not being ground fault circuit interrupter protected. 3. A certified service technician will install GFCI in all locations identified by Life Safety inspector. Environmental Services staff will visually survey the facility for any other locations that need GFCI protection and have the service technician install	8/9/19

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K 511	Continued From page 3 The facility failed to ensure electrical wiring and electrical equipment met the requirements of NFPA 70, National Electrical Code. Observation determined: 1) One (1) electrical receptacle in the Bathroom in Resident Rooms 3, 4, 7, 8, 10, 21, 24, 25, 26, 27, 36, 37, 48, 49, 60 and 61 were not ground-fault circuit-interrupter protected. 2) Four (4) electrical receptacles in the Unit A Shower Room were not ground-fault circuit-interrupter protected. 3) Three (3) electrical receptacles in the Unit B Shower Room were not ground-fault circuit-interrupter protected. 4) One (1) electrical receptacle in the Unit B Clean Utility Room was not ground-fault circuit-interrupter protected. Failure to provide electrical wiring and equipment in accordance with NFPA 70 increases the risk of injury or death due to fire. The deficiency affected twenty-four (24) of numerous receptacles in the facility.	K 511	GFCI's in any other locations that are necessary. 4. The Environmental Services Manager will QI monthly for 12 months to ensure GFCI's for proper operation. The Environment Services manager will add these devices to the policy for testing GFCI outlets. The Environmental Services Manager or his designee will be responsible. 5. Completion date August 9, 2019.	
K 712 SS=F	Fire Drills CFR(s): NFPA 101 Fire Drills Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at expected and unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar	K 712		8/30/19

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K 712	Continued From page 4 with procedures and is aware that drills are part of established routine. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 19.7.1.4 through 19.7.1.7 This REQUIREMENT is not met as evidenced by: The facility failed to conduct fire drills as required. Fire drill records review determined fire drills did not include the simulation of an emergency phone call to the fire department. Failure to conduct fire drills as required increases the risk of death or injury due to fire. The deficiency affected twelve (12) of twelve (12) drills in the past year.	K 712	1. No residents were directly affected by this deficiency. 2. All residents have the potential to be affected by the fire department not being notified when fire alarm is activated. 3. Our fire alarm system automatically notifies the police department which is monitored 24/7, but also a procedure has been added to the fire alarm report form to call the fire department (simulated during drill). 4. The Compliance Officer will make the necessary changes to the policy and report form. She will educate staff per employee pay stub insert distributed on August 2, 2019. The Environmental Services Manager will put a QI monitor in place to ensure fire drill and report are completed per policy. This will be completed monthly times 12 months. Environmental Services Manager or his designee will be responsible. 5. Completion date August 30, 2019	