

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

PRINTED: 04/22/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355051		(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 01/27/2016	
NAME OF PROVIDER OR SUPPLIER HATTON PRAIRIE VILLAGE				STREET ADDRESS, CITY, STATE, ZIP CODE 950 DAKOTA AVE HATTON, ND 58240			
(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 II (000) construction protected throughout by a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems.			K 000			
K 038 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1 This STANDARD is not met as evidenced by: The facility failed to keep exit corridors free of obstructions. 1) Means of egress must be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency. The width of means of egress shall be measured in the clear at the narrowest point of the exit component under consideration. Exception: Projections not more than 3 1/2 in. (8.9 cm) on each side shall be permitted at 38 in. (96 cm) and below. 7.1.10.1, 7.3.2 Observation determined: a) The water fountain in the South Wing extended approximately eighteen (18) inches from the corridor wall and protruded into the exit corridor.			K 038	1. Facility will remove self-closing devices from 12 doors that open into hallways. Facility will remove handrails by the 12 doors so doors can fully open against hallway walls. Facility will remove water fountain from south wing and remove water foundation from north wing. Facility will add delayed egress feature to its 8 exterior exit doors (Electro Watchman's Exit Delay Timer) to allow doors to open after 15 seconds of continuous pushing. 2. No other portions of the facility have the potential to be affected by the same deficient practice. Facility has only the 8 exterior exit doors and only the 12 doors that open into hallways.		3/12/16

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

02/11/2016

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 038	Continued From page 1 b) The water fountain in the North Wing extended approximately eighteen (18) inches from the corridor wall and protruded into the exit corridor. This deficiency affected exit access to two (2) of eight (8) exits from the facility. 2) During its swing, any door in a means of egress shall leave not less than one-half of the required width of an aisle, corridor, passageway, or landing unobstructed and shall not project more than 7 inches into the required width of an aisle, corridor, passageway, or landing, when fully open. 7.2.1.4.4. Observation determined the following doors opened outward into the exit corridor and extended more than 7 inches from the wall when fully opened. 1) The corridor door to the Nursing Supply Closet in the South Wing. 2) The corridor door to the Shower Room in the South Wing. 3) The corridor door to the Linen Closet in the South Wing. 4) The corridor door to the Housekeeping Storage Closet in the South Wing. 5) The corridor door to the Linen Closet in the East Wing. 6) The corridor door to the Oxygen Storage Room in the East Wing. 7) The corridor door to the Housekeeping Storage Room in the East Wing. 8) The corridor door to a Public Restroom in the East Wing. 9) The corridor door to the Sprinkler Riser Closet in the South Wing.	K 038	3. Deficiencies - once corrected - will not reoccur. 4. Facility will monitor its corrective actions to be sure they are implemented timely. Once corrected, deficient practices will not reoccur.		

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K 038	Continued From page 2 10) The corridor door to the Tub Room in the East Wing. 11) The corridor doors to two (2) Storage Closets in the West Wing. This deficiency affected twelve (12) of numerous corridor doors in the means of egress throughout the facility. The facility failed to ensure exit access was readily accessible at all times. 3) Doors are required to be arranged to be opened readily from the egress side. Locks, if provided, shall not require the use of special knowledge or effort for operation from the egress side. 19.2.2.2.1, 7.2.1.5.1, 19.2.2.2.4, 7.2.1.6.2 Observation determined the following doors were equipped with access-controlled magnetic locks that required a code to be entered on a key pad to release. The doors were not equipped with a delayed egress feature. 1) The double set of exit doors at the main entrance. 2) The single exit door from the north side of the Chapel. 3) The single exit door from the South Wing of the facility. 4) The double set of doors from the southeast employee exit. 5) The single exit door from the therapy area on the east side of the facility. 6) The single exit door from the East Wing of the facility. 7) The single exit door from the North Wing of the facility.	K 038			

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K 038	Continued From page 3 8) The single exit door from the West Wing of the facility. The deficiency affected egress from eight (8) of eight (8) exterior exits from the facility. Failure to ensure exit access is readily available at all times increases the risk of death or injury due to fire.	K 038			