

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

PRINTED: 06/01/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355092		(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 01/23/2018	
NAME OF PROVIDER OR SUPPLIER HILL TOP HOME OF COMFORT INC				STREET ADDRESS, CITY, STATE, ZIP CODE 95 HILL TOP DR KILLDEER, ND 58640			
(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 V (000) construction. The building was protected by a wet/dry automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems.			K 000			
K 211 SS=F	Means of Egress - General CFR(s): NFPA 101 Means of Egress - General Aisles, passageways, corridors, exit discharges, exit locations, and accesses are in accordance with Chapter 7, and the means of egress is continuously maintained free of all obstructions to full use in case of emergency, unless modified by 18/19.2.2 through 18/19.2.11. 18.2.1, 19.2.1, 7.1.10.1 This REQUIREMENT is not met as evidenced by: Openings required to have a fire protection rating by Table 8.3.4.2 shall be protected by approved, listed, labeled fire door assemblies and fire window assemblies and their accompanying hardware, including all frames, closing devices, anchorage, and sills in accordance with the requirements of NFPA 80, Standard for Fire Doors and Other Opening Protectives, except as otherwise specified in this code. 8.3.3.1.			K 211	1. A new reporting form will be used to document location and condition of all fire rated doors in the building. 2. All fire rated doors in the facility have the potential to be affected. 3. The new reporting from will identify location and condition of all fire rated doors in the building.		3/9/18

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

TITLE

(X6) DATE

Electronically Signed

01/29/2018

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 211	Continued From page 1 Fire-rated door assemblies shall be inspected and tested in accordance with NFPA 80, Standard for Fire Doors and Other Opening Protectives. 7.2.1.15.2 The facility failed to inspect and test fire rated door assemblies throughout the facility. Review of documentation and interview with staff determined fire rated door assemblies had not been inspected in the past year. Failure to inspect and test fire rated door assemblies increases the risk of injury or death due to fire. This deficiency affected all fire rated door assemblies throughout the facility.	K 211	4. A maintenance reminder and new section in our fire safety log has been issued. Testing will be done annually in January. 5. Corrective actions will be completed by March 9, 2018.		
K 345 SS=F	Fire Alarm System - Testing and Maintenance CFR(s): NFPA 101 Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available. 9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72 This REQUIREMENT is not met as evidenced by: Health care occupancies shall be provided with a fire alarm system in accordance with Section 9.6. 19.3.4.1 A fire alarm system required for life safety shall	K 345	1. Fire Panel Testing contractor will be contacted. Annual fire panel testing contract will be renewed. 2. All Fire Panel devices have the		3/9/18

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K 345	Continued From page 2 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 The facility failed to test the fire alarm system as required. Review of documentation determined device test results (alarm initiating, supervisory alarm initiating, and notification) did not provide an itemized list with the device type, address, location, and test result as required. Failure to install, 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 one (1) of one (1) fire alarm system. The fire alarm system serves the entire facility.	K 345	potential to be affected by this deficient practice. 3. Contract documents of new fire panels will include provisions for device and sensitivity testing. 4. The Fire Panel contractor has been hired to do testing of devices. A renewing contract has been set up with the fire panel contractor. Testing will be conducted annual by the contractor and maintenance will put a reminder on the calendar to ensure testing occurs. 5. Corrective actions will be completed by March 9, 2018.		3/9/18
K 347 SS=F	Smoke Detection CFR(s): NFPA 101 Smoke Detection 2012 EXISTING Smoke detection systems are provided in spaces open to corridors as required by 19.3.6.1. 19.3.4.5.2 This REQUIREMENT is not met as evidenced by: Sensitivity testing of smoke detectors is to be completed for all smoke detectors during the first year in service, and the alternate year following. After the second required calibration test, if the detector has remained within its listed and marked sensitivity range, the length of time	K 347	1. Fire Panel testing contractor will be contacted. An Annual fire panel testing contract will be renewed. 2. All smoke detectors throughout the building have the potential to be affected		

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K 347	Continued From page 3 between calibration tests may be extended, not to exceed five years. 19.3.4.5, 9.6.2.10.1.1, NFPA 72 14.4.5.3 The facility failed to ensure smoke detectors were maintained, inspected and tested in accordance with NFPA 72, National Fire Alarm and Signaling Code. Review of the fire alarm test results indicated the smoke detection system did not have sensitivity testing at frequencies in compliance with the minimum requirements of NFPA 72. Test records indicated the smoke detectors were last sensitivity tested on 10/19/2015, exceeding two years from this survey. The smoke detector sensitivity test results were not adequate to determine the use of the five-year interval. Failure to test the smoke detection system in accordance with NFPA 72 increases the risk of death or injury due to fire. This deficiency affected all smoke detectors in the facility.	K 347	by this deficient practice. 3. Contract documents for the new fire panel installations will include provisions for sensitivity testing at time of install. 4. Fire panel contractor has been hired to do smoke detector sensitivity testing. A renewing contract has been set up with the fire panel contractor for sensitivity testing. Testing will be conducted annually and maintenance will place a reminder on the calendar to ensure testing is completed. 5. Corrective actions will be completed by March 9, 2018.		
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 maintained in a secure location and readily available.	K 353		3/9/18	

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K 353	Continued From page 4 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, 5.1.1.2 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. Review of documentation determined the weekly and monthly inspections of the gauges and control valves of the automatic sprinkler system were not conducted in the past year. This deficiency affected numerous inspections of the automatic sprinkler system in the past year. The automatic sprinkler system serves the entire facility.	K 353	1. A new reporting form with the new monitoring requirements will be implemented including an updated maintenance reminder. 2. Fire sprinkler operations for the entire building has the potential to be affected by this deficient practice. 3. Maintenance will update the reminder with the new monitoring requirements. A clipboard with the new reporting forms will be located at fire sprinkler riser. 4. Maintenance will use the updated reminder and forms to monitor the fire sprinkler riser weekly. 5. Corrective actions will be completed by March 9, 2018.		

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K 353	Continued From page 5 Failure to inspect and test the automatic sprinkler system in accordance with NFPA 25 increases the risk of injury or death due to fire.	K 353			