

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

PRINTED: 05/02/2022
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 B. WING _____		(X3) DATE SURVEY COMPLETED 03/11/2020	
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
E 000	Initial Comments			E 000			
K 000	A recertification survey conducted on March 11, 2020 found Hill Top Home of Comfort Inc in compliance with the requirements of 483.73 Long Term Care Emergency Preparedness. INITIAL COMMENTS			K 000			
K 324 SS=D	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. Cooking Facilities CFR(s): NFPA 101 Cooking Facilities Cooking equipment is protected in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, unless: * residential cooking equipment (i.e., small appliances such as microwaves, hot plates, toasters) are used for food warming or limited cooking in accordance with 18.3.2.5.2, 19.3.2.5.2 * cooking facilities open to the corridor in smoke compartments with 30 or fewer patients comply with the conditions under 18.3.2.5.3, 19.3.2.5.3, or			K 324			4/25/20

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

TITLE

(X6) DATE

Electronically Signed

04/10/2020

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 324	Continued From page 1 * cooking facilities in smoke compartments with 30 or fewer patients comply with conditions under 18.3.2.5.4, 19.3.2.5.4. Cooking facilities protected according to NFPA 96 per 9.2.3 are not required to be enclosed as hazardous areas, but shall not be open to the corridor. 18.3.2.5.1 through 18.3.2.5.4, 19.3.2.5.1 through 19.3.2.5.5, 9.2.3, TIA 12-2 This REQUIREMENT is not met as evidenced by: The facility failed to install cooking equipment in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. A readily accessible means for manual activation shall be located between 1067 mm and 1219 mm (42 in. and 48 in.) above the floor, be accessible in the event of a fire, be located in a path of egress, and clearly identify the hazard protected. 19.3.2.5.1, 9.2.3, NFPA 96 10.5.1. Observation determined the manual actuation device for the fire-extinguishing system serving the Kitchen exhaust hood was mounted at a height of more than forty-eight (48) inches above the floor. Failure to inspect, maintain, and install the wet chemical extinguishing system in accordance with NFPA 96 increases the risk of injury or death due to fire.	K 324	1. The wet chemical suppression system contractor was contacted and a tentative timeline for the pull station to be moved was established. Due to the current COVID pandemic and guidance from the North Dakota department of health, Hilltop Home of Comfort is limiting vendors access to the facility. When the pandemic guidelines for the facility are lifted Maintenance Supervisor will contact the wet chemical suppression contractor to set an appointment to have the pull station lowered. 2. This deficiency has the potential to affect no other areas in the facility. 3. The wet chemical suppression system pull station will be lowered to between 42- 48 from the floor. Pending facility pandemic guideline changes to allow vendors in the facility. 4. The Maintenance supervisor will measure the height of the pull station		

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K 324	Continued From page 2 This deficiency affected one (1) of one (1) wet chemical extinguishing system in the facility.	K 324	after the work is completed to verify that it is between 42 □ 48 from the floor. No further monitoring will be needed. 5. The action will be completed by 25 Apr. 2020. If pandemic guidelines do not change to allow vendors in the facility before 25 Apr.2020 to complete the work. The Director will send an email to K. Himmelspace prior to the 25 Apr 2020 completion date to seek an extension.		
K 918 SS=F	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Maintenance and Testing The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110. Generator sets are inspected weekly, exercised under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of	K 918			3/12/20

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K 918	Continued From page 3 maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked, readily identifiable, and separate from normal power circuits. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70) This REQUIREMENT is not met as evidenced by: The facility failed to test the emergency power generator in accordance with NFPA 110, Standard for Emergency Power and Standby Systems. Record review and interview with staff determined the diesel emergency power generator was not exercised under load for 4 continuous hours in the past 36 months. Failure to test the emergency power generator in accordance with NFPA 110 increases the risk of injury or death due to fire. This deficiency affected one (1) of one (1) emergency power generator in the facility. The emergency power generator serves the entire facility.			K 918	1. A 4-hr. loaded generator run test was completed on 12 Mar. 2020. 2. All systems requiring emergency power in the facility had the potential to be affected by this deficiency. 3. The Maintenance Supervisor updated the maintenance reminder with month and year of required 4hr loaded generator run test. 4. The Maintenance supervisor will monitor the updated maintenance reminder monthly. The Maintenance supervisor will perform 4 hr. loaded generator run when month and year on updated maintenance reminder coincide. 5. Corrective action was completed on 12 Mar. 2020.		