STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355104	A. BUILDING _____ B. WING _____	06/25/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD SAMARITAN SOCIETY - LAKOTA	608 4TH AVE SW LAKOTA, ND 58344

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E 000	Initial Comments A recertification survey conducted on 06/25/2024 found Good Samaritan Society - Lakota in compliance with the requirements of 483.73 Long-Term Care Facilities Emergency Preparedness.	E 000		

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

Electronically Signed | 07/02/2024

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 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 III (211) construction with a wet/dry automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems.	K 000		
K 291 SS=D	Emergency Lighting CFR(s): NFPA 101 Emergency Lighting Emergency lighting of at least 1-1/2-hour duration is provided automatically in accordance with 7.9. 18.2.9.1, 19.2.9.1 This REQUIREMENT is not met as evidenced by: Testing of required emergency lighting systems shall be permitted to be conducted as follows: 1) Functional testing shall be conducted monthly, with a minimum of 3 weeks and a maximum of 5 weeks between tests, for not less than 30 seconds. 2) The test interval shall be permitted to be extended beyond 30 days with the approval of the authority having jurisdiction. 3) Functional testing shall be conducted annually for a minimum of 1½ hours if the emergency lighting system is battery powered. 4) The emergency lighting equipment shall be fully operational for the duration of the tests.	K 291	1) The deficiencies noted occurred in the past and therefore cannot be corrected. Testing will be completed as required. 2) All portions of the facility have the potential to be affected by this deficient practice. 3) Education on testing and maintenance of the emergency lights in accordance with NFPA 101 will be provided to all maintenance staff by August 9, 2024. 4) Audits will be performed to ensure this practice does not recur at the following frequency: monthly for six	8/9/24

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K 291	Continued From page 1 5) Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction. 7.9.3.1.1 The facility failed to ensure the emergency lighting was in proper operating condition to provide 1½ hours of emergency illumination in the event of failure of normal lighting. Record review determined the facility failed to conduct a 30-second monthly test of the emergency battery back-up lights during the month of October 2023. Failure to test and maintain the emergency lights in accordance with NFPA 101 increases the risk of death or injury due to fire. The deficiency affected all emergency battery back-up lights throughout the building.	K 291	months. These audits will be completed by the Supervisor of Ancillary Services or designee. 5) The corrective action will be completed by August 9, 2024.	
K 324 SS=D	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 * cooking facilities in smoke compartments with	K 324		8/9/24

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K 324	Continued From page 2 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: Commercial cooking equipment shall be in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. Maintenance of the fire-extinguishing systems and listed exhaust hoods containing a constant or fire-activated water system that is listed to extinguish a fire in the grease removal devices, hood exhaust plenums, and exhaust ducts shall be made by properly trained, qualified, and certified person(s) acceptable to the authority having jurisdiction at least every 6 months. 19.3.2.5.1, 9.2.3, NFPA 96 11.2.1. The facility failed to test and service the fire-extinguishing system serving the Kitchen exhaust hood in accordance with NFPA 96. Record review determined the fire-extinguishing system serving the Kitchen exhaust hood was last inspected and serviced in October 2023 by an outside company, exceeding the required 6 months testing requirement.	K 324	1) The deficiencies noted occurred in the past and therefore cannot be corrected. The fire-extinguishing system serving the kitchen exhaust hood will be inspected, tested and serviced as soon as practicably possible. 2) The kitchen is the only area within the facility that has the potential to be affected by this deficient practice. 3) Education on testing and service of the fire extinguishing system serving the kitchen exhaust hood will be provided to all maintenance staff by August 9, 2024. 4) Audits will be performed to ensure this practice does not recur at the following frequency: monthly for six months. These audits will be completed by the Supervisor of Ancillary Services or designee. 5) The corrective action will be completed by August 9, 2024.	

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K 324	Continued From page 3 Failure to inspect and service the fire-extinguishing system for the Kitchen exhaust hood at required intervals increases the risk of injury or death due to fire. This deficiency affected one (1) of two (2) required inspections of the Kitchen exhaust hood fire-extinguishing system in the past year.	K 324		
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 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 System defects and malfunctions shall be corrected. NFPA 72 14.2.1.2.2 The facility failed to ensure the fire alarm system was maintained, inspected and tested in	K 345	1) The deficiencies noted occurred in the past and therefore cannot be corrected, however, our contracted fire protection company will be scheduled to perform the smoke detector sensitivity testing on smoke detectors 32, 33, and 34 by or before August 9, 2024. The three duct detectors noted (71, 72, and 73) will be investigated and the facility will determine if these should or should not be included on fire inspections. The contracted fire protection company will replace and install new batteries in the fire alarm by or before August 9, 2024. 2) All portions of the facility have the potential to be affected by this deficient	8/9/24

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K 345	Continued From page 4 accordance with NFPA 72, National Fire Alarm Code. 1) Review of fire alarm system test records indicated that not all devices were tested. The fire alarm system annual test conducted on 01/20/2024 by an outside company indicated smoke detectors 32, 33, and 34 in the atrium were not tested in the past year. 2) Review of fire alarm system test records indicated that not all devices were tested. The fire alarm system annual test conducted on 01/20/2024 by an outside company indicated duct detectors 71, 72, and 73 were not tested in the past year. 3) The fire alarm system annual test conducted on 01/20/2024 by an outside company indicated the fire alarm batteries had failed due to age and had not been replaced at the time of the survey. 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. The deficiency affected the complete fire alarm system, which serves the entire building.	K 345	practice. 3) Education on installation, testing and maintenance of the fire alarm system in accordance with NFPA 72 will be provided to all maintenance staff by August 9, 2024. 4) Audits will be performed to ensure this practice does not recur at the following frequency: monthly for six months or up until all three areas have been resolved. These audits will be completed by the Supervisor of Ancillary Services or designee. 5) The corrective action will be completed by August 9, 2024.	
K 511 SS=D	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.	K 511		8/9/24

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K 511	Continued From page 5 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2 This REQUIREMENT is not met as evidenced by: The facility failed to ensure electrical wiring and electrical equipment met the requirements of NFPA 70, National Electrical Code. 19.5.1.1, 9.1.2 There were two (2) open electrical junction boxes on the ceiling in the Chapel. 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 two (2) of numerous components of the electrical system in the facility.	K 511	1) The deficiencies noted were electrically capped and covered on July 3, 2024 and are scheduled for maintenance by August 9, 2024. 2) All portions of the facility have the potential to be affected by this deficient practice. 3) Education on electrical wiring and equipment in accordance with NFPA 70 will be provided to all maintenance staff by August 9, 2024. 4) Audits will be performed to ensure this practice does not recur at the following frequency: monthly for six months or up until all three areas have been resolved. These audits will be completed by the Supervisor of Ancillary Services or designee. 5) The corrective action will be completed by August 9, 2024.	
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	K 918		8/9/24

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K 918	Continued From page 6 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 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 ensure the emergency generator was in compliance with NFPA 99 and NFPA 110. Record review and interview with staff determined: 1) The weekly inspection of the emergency generator was not conducted for all weeks during the past year.	K 918	1) The deficiencies noted occurred in the past and therefore cannot be corrected. Inspections and testing will be completed as required. 2) All portions of the facility have the potential to be affected by this deficient practice. 3) Education on inspection, testing and maintenance of the emergency generator in accordance with NFPA 99 and NFPA	

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K 918	Continued From page 7 2) No monthly load tests of the emergency generator were conducted during June, August, September, October, and November 2023 and May 2024. Failure to inspect, test and maintain the emergency generator in accordance with NFPA 99 and NFPA 110 increases the risk of death or injury due to fire. The deficiency affected one (1) of one (1) emergency generator which provides all emergency power to the facility.	K 918	110 will be provided to all maintenance staff by August 9, 2024. 4) Audits will be performed to ensure this practice does not recur at the following frequency: monthly for six months. These audits will be completed by the Supervisor of Ancillary Services or designee. 5) The corrective action will be completed by August 9, 2024.	