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	355097	A. BUILDING **01** B. WING _____	**02/14/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD SAMARITAN SOCIETY - LARIMORE	**501 E FRONT ST** **LARIMORE, ND 58251**

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E 000	Initial Comments A recertification survey conducted on 02/14/2023 found Good Samaritan Society - Larimore in compliance with the requirements of 483.73 Long-Term Care Facilities Emergency Preparedness.	E 000		
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 that was protected by a wet automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems. A one-story Wellness Center addition was attached to the northeast end of the nursing home in 2014 of Type V (111) construction. A two-hour fire rated wall assembly separated the nursing home from an assisted living occupancy attached to the south end of the building.	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	K 211		3/20/23

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

Electronically Signed | 02/24/2023

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K 211	Continued From page 1 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. 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. The deficiency affected numerous fire rated door assemblies throughout the facility. 2) 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. 7.1.10.1, 7.3.2.2	K 211	1. Fire rated doors will be inspected on the day of the fire drill. Documentation will be included on the fire drill work document. The Maintenance Director will observe and review for appropriate door assemblies. The Maintenance Director will include this information with his monthly Fire Report to QAPI. Concerns or actions taken will be documented and maintained in the Maintenance Director's office. 2. The facility will maintain a clear path from exit doors. The facility currently has a Maintenance Director in place along with a contract for snow removal. The Maintenance Director will be responsible for monitoring the doors for snow removal. This will be on a continual basis.	

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K 211	Continued From page 2 The facility failed to keep means of egress free of obstructions. Observation determined approximately 6-inches of snow covered the sidewalk outside the north exit. This deficiency affected one (1) of five (5) 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 211		
K 291 SS=F	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	The facility will implement functional testing of a minimum of 30 seconds monthly. These tests will be conducted and recorded by the Maintenance Director. Records will be maintained and made available for review in the facility Maintenance office. Findings of concern will be reported to the monthly QAPI team meeting. The facility will conduct an annual test in the month of March yearly to include a minimum of 1 hour testing time to ensure proper function and operation. These written records will be maintained and completed by the facility Maintenance	3/21/23

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K 291	Continued From page 3 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. Review of records indicated the facility failed to conduct monthly 30-second or a 90-minute annual test of the emergency battery back-up lights in the past year. Failure to provide emergency lighting as required increases the risk of death or injury due to fire. The deficiency affected all emergency battery back-up lights in the building.	K 291	Director, and will be kept with the monthly records of testing. Maintenance Director will ensure the test is completed in the Month of March and will report any concerns to the March QAPI meeting. Records will be completed and annual test will be completed by March 21,2023.	
K 324 SS=E	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 30 or fewer patients comply with conditions under	K 324		3/20/23

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K 324	Continued From page 4 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. Automatic wet chemical fire-extinguishing systems shall be installed in accordance with the terms of their listing, the manufacturer's instructions, and NFPA 17A, Standard for Wet Chemical Extinguishing Systems. 19.3.2.5.1, 9.2.3, NFPA 96 10.2.6(4). The facility failed to inspect, test and maintain the wet chemical extinguishing system in the Kitchen in accordance with NFPA 17A, Standard for Wet Chemical Extinguishing Systems and NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. 1) On a monthly basis, inspection shall be conducted in accordance with the manufacturer's listed installation and maintenance manual or the owner's manual. At a minimum, this quick check or inspection shall include verification of the following:	K 324	1. The Dietary Manager will be responsible for ensuring that a monthly check that includes: (1) The extinguishing system is in its proper location. (2) The manual actuators are unobstructed. (3) The tamper indicators and seals are intact. (4) The maintenance tag or certificate is in place. (5) No obvious physical damage or condition exists that might prevent operation. (6) The pressure gauge, if provided, shall be inspected physically or electronically to ensure it is in the operable range. (7) The nozzle blowoff caps, where provided, are intact and undamaged. (8) Neither the protected equipment nor the hazard has not been replaced, modified, or relocated. The Dietary Manager will take action if during the check any items are of	

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K 324	Continued From page 5 (1) The extinguishing system is in its proper location. (2) The manual actuators are unobstructed. (3) The tamper indicators and seals are intact. (4) The maintenance tag or certificate is in place. (5) No obvious physical damage or condition exists that might prevent operation. (6) The pressure gauge, if provided, shall be inspected physically or electronically to ensure it is in the operable range. (7) The nozzle blowoff caps, where provided, are intact and undamaged. (8) Neither the protected equipment nor the hazard has not been replaced, modified, or relocated. If any deficiencies are found, appropriate corrective action shall be taken immediately. Where the corrective action involves maintenance, it shall be conducted by a trained service technician. Personnel making inspections shall keep records for those extinguishing systems that were found to require corrective actions. At least monthly, the date the inspection is performed and the initials of the person performing the inspection shall be recorded. The records shall be retained for the period between the semiannual maintenance inspections. NFPA 17A 7.2.1 through 7.2.6 Review of documentation and interview with staff determined the monthly inspections of the wet chemical extinguishing system in the Kitchen had not been completed during the past twelve months. 2) Maintenance of the fire-extinguishing systems	K 324	concern. The Dietary Manager will maintain records of the check and actions taken. The Dietary Manager will report monthly to QAPI, how the checks are going for 3 months. The Dietary Manager will keep these records and be able to provide the Monthly Documentation as needed. 2. This system was inspected and serviced by Nardini in January 2023 according to the tag attached to the system. I placed a phone call to Kevin to alert to this being completed previous to survey.	

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K 324	Continued From page 6 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. NFPA 96 11.2.1. Record review determined the fire-extinguishing system serving the Kitchen exhaust hood was last inspected and serviced on 01/12/2022 by an outside company. No record was available indicating an inspection and service of the Kitchen exhaust hood fire extinguishing system has been done in the past 12 months. Failure to install, inspect, test and maintain the wet chemical extinguishing system in accordance with NFPA 96 and NFPA 17A increases the risk of injury or death due to fire. This deficiency affected one (1) of one (1) wet chemical extinguishing system in the facility.	K 324		
K 341 SS=F	Fire Alarm System - Installation CFR(s): NFPA 101 Fire Alarm System - Installation A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. In areas not continuously occupied, detection is installed at each fire alarm control unit. In new occupancy, detection is also installed at notification appliance circuit power extenders, and supervising station transmitting equipment.	K 341		2/17/23

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K 341	Continued From page 7 Fire alarm system wiring or other transmission paths are monitored for integrity. 18.3.4.1, 19.3.4.1, 9.6, 9.6.1.8 This REQUIREMENT is not met as evidenced by: The facility failed to install the fire alarm system in accordance with NFPA 72, National Fire Alarm and Signaling Code. Fire alarm system circuit identification and accessibility shall meet the following: 1) The location of the dedicated branch circuit disconnecting means shall be permanently identified at the control unit. 2) The circuit disconnecting means shall be identified as "FIRE ALARM CIRCUIT." 3) The circuit disconnecting means shall have a red marking. 4) The circuit disconnecting means shall be accessible only to authorized personnel. NFPA 72 10.5.5.2 Observation determined the location of the circuit disconnecting means was not permanently identified at the fire alarm control unit. Failure to install the fire alarm system in accordance with NFPA 72 increases the risk of death or injury due to fire. The deficiency affected one (1) of one (1) fire alarm system in the facility, which serves the entire building.	K 341	Facility corrected this concern on 2/17/2023. The circuit is now clearly marked "Fire Alarm Circuit", the disconnecting means has a red marking. This will be monitored quarterly by the Maintenance Director to ensure the circuit is clearly marked. The Maintenance Director will report to the QAPI meeting in March and in June to alert to any concerns with the markings.	
K 345	Fire Alarm System - Testing and Maintenance	K 345		3/20/23

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K 345 SS=F	Continued From page 8 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 The facility failed to ensure the fire alarm system was maintained, inspected and tested in accordance with NFPA 72, National Fire Alarm Code. Review of documentation determined: 1) The most recent annual fire alarm system testing and inspection occurred on 09/15/2021 by an outside company, exceeding one year. 2) No documentation was available indicating a load voltage test of the fire alarm system batteries has been done in the past year.	K 345	The facility currently has contracts with Nardini and Dakota Fire Protection to complete necessary Fire Inspections per regulation. The facility will ensure that all testing and records are completed for this quarter and then as required for this year. The facility Maintenance Director will oversee the inspections as well as coordinate timely quarterly and annual according to NFPA. The facility has requested records from 2022 from these service providers, these records will be kept with the new audit forms. The Maintenance Director will be responsible for maintaining records of these in the Maintenance Office. The Maintenance Director will complete a monthly Fire Report that will be presented to the QAPI team each month for the next 6 months.	

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K 345	Continued From page 9 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		
K 347 SS=D	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: In spaces served by air-handling systems, detectors shall not be located where airflow prevents operation of the detectors. Detectors should not be located in a direct airflow or closer than 36 in. from an air supply diffuser or return air opening. 19.3.4.5.1, 9.6.2.10.1.1, NFPA 72 17.7.4.1, A.17.7.4.1 The facility failed to ensure the smoke detection system was in compliance with NFPA 72, National Fire Alarm and Signaling Code. Observation determined one (1) smoke detector in the corridor near Resident Room 203 was installed within 36 in. of an air diffuser. Failure to install the smoke detection system as required increases the risk of death or injury due to fire. This deficiency affected one (1) of numerous	K 347	The smoke detector located by room 203 was relocated on 2/20/2023 by Electrician Mitch Tupa. All smoke detectors are now appropriately placed throughout the facility. The facility Maintenance Director will be responsible for ensuring notification to the Administrator immediately preceding relocation of any smoke detector in the facility. Administration will contact the appropriate Departments to verify moving and appropriate location.	2/24/23

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K 347	Continued From page 10 smoke detectors in the facility. The smoke detection system serves the entire facility.	K 347		
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. 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 The facility failed to ensure the automatic	K 353	Quarterly Sprinkler testing was completed on 3/10/22,6/14/22,9/23/22 and annual was completed on 12/6/22. These records are now located in the Maintenance Director's office in a Manual labeled Dakota Fire Protection/Nardini Fire Equipment. This facility will continue to use these companies to ensure the Sprinkler System is tested appropriately according to NFPA. This facility will include the testing information and any concerns or	3/24/23

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K 353	Continued From page 11 sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. 1) Record review and observation determined quarterly flow tests of the automatic sprinkler system were not completed as required. Records did not indicate a flow test was conducted during the second and fourth quarter of 2022. 2) Observation determined two (2) sprinklers in the Laundry Room were covered in heavy dust and lint. 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	actions taken in this binder. The Maintenance Director is responsible for ensuring that the necessary audits are in the correct timeframe and the information is filed and easily available for review. The Maintenance Director will report the Inspections on a quarterly basis for the year of 2023 to the facility QAPI committee. The next quarterly inspection from Dakota Fire will be completed prior to March 25, 2023 Sprinkler heads in the laundry room were cleaned on 2/17/2023. Sprinkler heads will be included in the monthly checks. Staff in the laundry area are to alert the Maintenance Director to extra build up at any time between quarterly checks. These alerts will be completed and reported as part of the monthly QAPI Fire Report.	
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. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2 This REQUIREMENT is not met as evidenced	K 511		2/17/23

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GOOD SAMARITAN SOCIETY - LARIMORE	**501 E FRONT ST** **LARIMORE, ND 58251**

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K 511	Continued From page 12 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, rooftops, outdoors, indoor wet locations, locker rooms with associated showering facilities, garages 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) The facility failed to ensure electrical wiring and electrical equipment met the requirements of NFPA 70, National Electrical Code. Observation determined two (2) electrical receptacles in the Shower Room within 6 ft. of a sink were 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 two (2) of numerous receptacles in the facility.	K 511	On 2/17/2023 The electrician Mitch Tupa was in house and verified via phone call with Administrator and Carla from Licensure that the ground faults were appropriately located at the box.	
K 712 SS=E	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		3/21/23

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355097	A. BUILDING **01** B. WING _____	**02/14/2023**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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K 712	Continued From page 13 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 no fire drills were conducted on the second shift during the first and third quarter of 2022, and the first shift during the fourth quarter of 2022. Failure to conduct fire drills as required increases the risk of death or injury due to fire. The deficiency affected three (3) of twelve (12) drills in the past year.	K 712	The facility will conduct fire drills at least quarterly every shift. The fire drills will be conducted by the Maintenance Director. The Maintenance Director will be responsible for arranging, holding, documenting and needed education for each fire drill that is scheduled. The Maintenance Director will report the monthly fire drill date and shift-with concerns noted to the monthly QAPI meeting. This will be reported to the committee monthly for the year of 2023. The Maintenance Director has a schedule to ensure that each quarter the appropriate shift is given the drill. The Maintenance Director will keep written records of these drills and those records will be maintained in the Maintenance office.	