

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

PRINTED: 03/04/2015

FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355101	(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 - DAKOTA ALPHA B. WING _____		(X3) DATE SURVEY COMPLETED 03/04/2015
NAME OF PROVIDER OR SUPPLIER DAKOTA ALPHA			STREET ADDRESS, CITY, STATE, ZIP CODE 1303 27TH STREET NW MANDAN, ND 58554		
(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 The 2000 edition of NFPA 101, Life Safety Code, Chapter 18-New Health Care Occupancies, was used for this survey in compliance with 42 CFR 483.70(a). The findings that follow demonstrate noncompliance with these standards. The facility is located in a one-story building of Type V (111) construction with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems.	K 000			
K 052 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system has an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72. 9.6.1.4 This STANDARD is not met as evidenced by: The facility failed to ensure the fire alarm system was in compliance with NFPA 72, National Fire Alarm Code. Review of fire alarm system test records indicated the semiannual load voltage tests of the sealed lead acid batteries were not performed as required. Records indicated a load voltage test of the fire alarm system batteries was conducted by an outside company on April 10, 2014. Facility records indicated that the maintenance staff replaced the batteries for the fire alarm system in	K 052	A procedure for completing load testing every six months was put in place on 3-9-2015. (See Appendix A) The fire panel is the only one in the facility and it will be completed per the procedure. A procedure was written and implemented on 3-9-2015 to ensure compliance, and a schedule with sign off sheet was placed in the fire panel. (See Appendix B) The maintenance staff will monitor the schedule sign off sheet to make sure the testing is done in April and October of each year. The maintenance staff will document the tests on the sheet in panel. The procedure was written and put in place on 3-9-2015.	03/09/15	

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

TITLE

(X6) DATE

Deaton Lisa

Administrator

3/9/2015

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 052	Continued From page 1 February 2015. The time frame from the April 10, 2014 test and the replacement of the batteries in February 2015 exceeds six months. Failure to test and maintain the fire alarm system in accordance with NFPA 72, National Fire Alarm Code, increases the risk of death or injury due to fire. This deficiency affected one (1) of two (2) required load voltage tests of the batteries in the last year. The fire alarm system serves the entire facility. Ref: 2000 NFPA 101 Section 18.3.4.1, 9.6.1.4; 1999 NFPA 72 table 7-3.2 item 6.d.3.	K 052			