

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

PRINTED: 01/29/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355052		(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 11/06/2018	
NAME OF PROVIDER OR SUPPLIER NELSON COUNTY HEALTH SYSTEM CARE CENTER				STREET ADDRESS, CITY, STATE, ZIP CODE 108 E NYHUS AVE MCVILLE, ND 58254			
(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 II (000) construction with no basement. The building was equipped with a wet automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. A two-hour fire resistance rated barrier provided separation to a building attached to the north side of the nursing facility housing assisted living apartments.			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,			K 211	1. Corrective action will be completed by an annual checklist. We created a list of facility doors requiring an annual inspection. This list is included in the maintenance department binder. The		12/21/18

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

TITLE

(X6) DATE

Electronically Signed

11/18/2018

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 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. 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	maintenance department will inspect the doors using the checklist. 2. The administrator and maintenance department personnel will determine and identify if all doors in the facility will require inspection. If changes are made, the checklist will be adjusted to include all required doors. 3. Measures put into place are education of the maintenance and administration departments about the inspection process. 4. The maintenance inspection binder is reviewed periodically to see what tasks are to be completed. The door inspection checklist will be part of the review. 5. 12/21/2018	12/21/18	
K 351 SS=F	Sprinkler System - Installation CFR(s): NFPA 101 Spinkler System - Installation 2012 EXISTING Nursing homes, and hospitals where required by construction type, are protected throughout by an approved automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems. In Type I and II construction, alternative protection measures are permitted to be substituted for sprinkler protection in specific areas where state or local regulations prohibit	K 351			

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K 351	Continued From page 2 sprinklers. In hospitals, sprinklers are not required in clothes closets of patient sleeping rooms where the area of the closet does not exceed 6 square feet and sprinkler coverage covers the closet footprint as required by NFPA 13, Standard for Installation of Sprinkler Systems. 19.3.5.1, 19.3.5.2, 19.3.5.3, 19.3.5.4, 19.3.5.5, 19.4.2, 19.3.5.10, 9.7, 9.7.1.1(1) This REQUIREMENT is not met as evidenced by: Buildings containing nursing homes shall be protected throughout by an approved, supervised automatic sprinkler system. 19.3.5.1, 9.7.1.1(1) The facility failed to install the automatic sprinkler system in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems to provide adequate coverage for all portions of the building. 1) Sprinklers in the high-temperature zone shall be of the high-temperature classification, and sprinklers in the intermediate-temperature zone shall be of the intermediate-temperature classification. NFPA 13 8.3.2, 8.3.2.5(1), Table 8.3.2.5(a)(2) a) NFPA 13 requires high-temperature-rated sprinklers within a 7 ft. radius cylinder extending 7 ft. above and 2 ft. below horizontal discharge unit heaters. Observation determined one (1) sprinkler in the West Boiler Room installed within 7 ft. of unit heaters was not high-temperature-rated. b) NFPA 13 requires	K 351	1. For 1., a contractor is scheduled to change the sprinkler in the West Boiler Room. For 2., the top shelves will be taken out completely by our maintenance staff. 2. For 1., the contractor and maintenance staff will identify sprinklers that need to be changed. For 2., the maintenance staff will inspect the sprinkler heads and the distance from them. All adjustments will be made. 3. For both 1 and 2, the contractor and maintenance staff will do a walkthrough during the contractor visit and determine changes needed. 4. The maintenance staff will educate staff concerning deficiency and all staff will report changes need within the facility to maintenance or administration. 5. 12/21/2018		

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K 351	Continued From page 3 intermediate-temperature-rated sprinklers within a 7 ft. to 20 ft. radius pie-shaped cylinder extending 7 ft. above and 2 ft. below horizontal discharge heaters on the discharge side; also a 7 ft. radius cylinder more than 7 ft. above horizontal discharge unit heaters. Observation determined one (1) sprinkler in the Laundry Room installed between 7 ft. and 20 ft. on the discharge side of horizontal discharge unit heaters was not intermediate-temperature-rated. 2) The clearance between a sprinkler deflector and the top of storage shall be 18 inches or greater. NFPA 13 8.5.6.1 Observation determined the clearance between the sprinkler deflector and the top shelf in the closets in the following rooms was less than 18 inches: a) Beauty Shop b) Rehabilitation Services Room c) All Resident Rooms This deficiency affected twenty-eight (28) of numerous areas in the facility. The automatic sprinkler system serves the entire facility.	K 351			
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	K 353			12/21/18

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K 353	Continued From page 4 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 All backflow preventers installed in fire protection system piping shall be tested annually by conducting a forward flow test of the system at the designed flow rate, including hose stream demand, where hydrants or inside hose stations are located downstream of the backflow preventer. NFPA 25, 13.6.2.1 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by	K 353	1. A monthly checklist is created for the control valves and gauges of the automatic sprinkler system. The maintenance staff will document the inspection and report any corrective action for repair. The back flow preventer test will be conducted by an outside contractor. The contractor test information will be placed in the inspection binder. 2. The maintenance staff will document all areas that will need inspection for the control valves and gauges. 3. The maintenance staff will educate all maintenance employees and administration of the location of the control valves and gauges. 4. The monthly checklist will be reviewed periodically to determine inspections are documented properly and the annual		

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K 353	Continued From page 5 NFPA 25. Record review and observation determined: 1) The control valves and the gauges of the automatic sprinkler system had not been inspected monthly. 2) No annual back flow preventer test was conducted in the past year. 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	back flow preventer test is conducted. 5. 12/21/2018	12/21/18	
K 355 SS=F	Portable Fire Extinguishers CFR(s): NFPA 101 Portable Fire Extinguishers Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. 18.3.5.12, 19.3.5.12, NFPA 10 This REQUIREMENT is not met as evidenced by: Fire extinguishers shall be subjected to maintenance at intervals of not more than 1 year, at the time of hydrostatic test, or when specifically indicated by an inspection. NFPA 10 4-4.1 The facility failed to maintain fire extinguishers in accordance with NFPA 10, Standard for Portable Fire Extinguishers.	K 355	1. A contractor is scheduled to perform annual maintenance on the fire extinguishers in the facility. 2. The maintenance staff will do a walkthrough with the contractor to identify fire extinguishers and verify annual maintenance.		

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K 355	Continued From page 6 Observation determined the annual maintenance of the portable fire extinguishers in the facility had not been conducted since October 2017. Failure to ensure portable fire extinguishers comply with NFPA 10 increases the risk of death or injury due to fire. The deficiency affected all portable fire extinguishers in the facility.	K 355	3. The maintenance staff will place the prior year fire extinguisher annual maintenance report from the contractor in the inspection binder. The maintenance staff will contact the contractor to schedule annual fire extinguisher maintenance. 4. Maintenance staff and administration will monitor the inspection binder and follow up with the contractor to schedule the annual fire extinguisher maintenance prior to the 12 months since the last inspection. 5. 12/21/2018	12/21/18	
K 918 SS=F	Electrical Systems - Essential Electric System 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	K 918			

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K 918	Continued From page 7 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: Generator sets serving essential electrical systems shall be tested in accordance with NFPA 110, Standard for Emergency and Standby Power Systems. Diesel generator sets in service shall be exercised at least once monthly, for a minimum of 30 minutes, using one of the following methods: (1) Loading that maintains the minimum exhaust gas temperatures as recommended by the manufacturer. (2) Under operating temperature conditions and at not less than 30 percent of the EPS nameplate kW rating. Diesel-powered EPS installations that do not meet the requirements shall be exercised monthly with the available EPSS load and shall be exercised annually with supplemental loads at not less than 50 percent of the EPS nameplate	K 918	1. An electrician and our generator inspection contractor are scheduled to be onsite and conduct the required testing to exercise the diesel generator to at least 30 percent of the nameplate rating. The generator testing will be analyzed and adjusted so that at least 30 percent will be reached during the monthly testing conducted by our maintenance staff. 2. No other portions of the facility are affected. 3. The monthly generator tests are part of the inspection binder. The sample calculation sheet given to our maintenance staff will be included in the monthly generator test. Administration and maintenance will review the monthly tests and complete the calculation to determine the percentage.		

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K 918	Continued From page 8 kW rating for 30 continuous minutes and at not less than 75 percent of the EPS nameplate kW rating for 1 continuous hour for a total test duration of not less than 1.5 continuous hours. NFPA 99 6.4.4.1.1.4, NFPA 110 8.4.1, 8.4.2, 8.4.2.3 The facility failed to ensure the emergency generator was in compliance with NFPA 99 and NFPA 110. Review of generator test records did not indicate that the minimum exhaust temperature provided by the manufacturer was achieved and that the monthly exercise of the diesel generator loaded the generator to at least 30 percent (36 kW) of the nameplate rating. The nameplate rating of the generator was 117 kW. The facility did not perform annual supplemental load exercises as required when diesel generators are not loaded to 30 percent of nameplate rating or manufacturer's recommended temperature is achieved during the required monthly exercises. Failure to inspect 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	4. The maintenance inspection binder is reviewed periodically by the administrator and maintenance staff. Generator test records will be inspected to determine the 30 percent requirements and met. 5. 12/21/2018		