

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

PRINTED: 07/07/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355094		(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/08/2022	
NAME OF PROVIDER OR SUPPLIER GOOD SAMARITAN SOCIETY - MOHALL				STREET ADDRESS, CITY, STATE, ZIP CODE 602 E MAIN ST MOHALL, ND 58761			
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E 000	Initial Comments			E 000			
K 000	A recertification survey conducted on August 8, 2022 found Good Samaritan Society - Mohall in compliance with the requirements of 483.73 Long Term Care Emergency Preparedness. INITIAL COMMENTS			K 000			
K 291 SS=F	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 with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems. 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			K 291	K291: 1. The emergency lighting equipment shall be fully operational of the duration of the 90 minute tests and written records will be kept by the owner of the inspection. The Maintenance Director will complete a 90 minute test of the Emergency battery back- up lights for all		9/22/22

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

TITLE

(X6) DATE

Electronically Signed

08/18/2022

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 291	Continued From page 1 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. 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 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	areas of the building. 2. All of the facility has the potential to be affected. 3. The Administrator and/or designee will review the regulation with the Maintenance Director for compliance. Maintenance and/or designee will conduct annual tests and keep annually inspection records at our location for the 90 minute testing of the Emergency battery back □ up lights to ensure compliance. 4. Maintenance and/or designee will add a PM (preventative Maintenance) Task for annual inspection in the TELS system to flag the due date. The Maintenance Director and/or Designee will monitor and audit the inspections yearly X 1. We will take this to our Quality Assurance Committee yearly x1. 5. Completion date will be by 9/22/2022.		
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.	K 345		9/22/22	

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K 345	Continued From page 2 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) Device test results (alarm initiating, supervisory alarm initiating, and notification) did not provide an itemized list with the device type, address, location, and test result as required. 2) A load voltage test of the fire alarm system batteries was conducted by an outside company during the annual inspection on 02/02/2022. No record was available to indicate another load voltage test was conducted in the past year. 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	K345: Fire Alarm System ☐ Testing and Maintenance 1. The Maintenance Director and/or designee will set up a date for a Device and load Voltage test with Convergent and/or another certified company to complete the test and obtain a detailed report from the company to include an itemized list of the device type, address, location and test result. 2. All of the facility has the potential to be affected. 3. The Administrator and/or designee will review the regulation with the Maintenance Director for compliance. Maintenance and/or designee will review the regulation with the outside company for compliance of testing and obtaining the summary and detailed reports. 4. Maintenance and/or designee will add a PM (preventative Maintenance) Task for annual inspection in the TELS system to flag the due date. The Maintenance Director and/or Designee will monitor and audit the inspections yearly X 1. We will take this to our Quality Assurance Committee yearly x1. 5. Completion date will be by 9/22/2022		

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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 sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25.	K 353	K353: Sprinkler System ☐ Maintenance and testing 1. Maintenance and/or designee will set up a date for Viking and/or an outside company to complete the Flow tests and obtain a copy of the report and test results for our records. 2. All of the facility has the potential to be affected. 3. The Administrator and/or designee will review the regulation with the Maintenance Director for compliance. Maintenance and / or designee will review the regulation with the outside company for compliance of testing and obtaining		9/22/22

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K 353	Continued From page 4 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 first and second quarter of 2021. 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	the summary and detailed reports. 4. Maintenance and/or designee will add a PM (preventative Maintenance) Task for annual inspection in the TELS system to flag the due date. The Maintenance Director and/or Designee will monitor and audit the inspections quarterly X4. We will take this to our Quality Assurance Committee quarterly X 4. 5. Completion date will be by 9/22/2022		
K 712 SS=D	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 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 first and third shifts during the second quarter of 2022.	K 712	K712: 1. Maintenance and/or designee will complete a fire drill on all three shifts. 2. All of the facility has the potential to be affected. 3. The Administrator and/or designee will review the regulation with the	9/22/22	

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K 712	Continued From page 5 Failure to conduct fire drills as required increases the risk of death or injury due to fire. The deficiency affected two (2) of twelve (12) drills in the past year.	K 712	Maintenance Director for compliance. 4. Maintenance and/or designee will add a PM (preventative Maintenance) Task for quarterly fire drill tests in the TELS system to flag the due date. The Maintenance Director and/or Designee will monitor and audit the fire drills quarterly X4. We will take this to the Quality Assurance Committee quarterly X4. 5. Completion Date by 9/22/2022.		
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	K 918		9/22/22	

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K 918	Continued From page 6 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 test the emergency power generator in accordance with NFPA 110, Standard for Emergency Power and Standby Systems. Record review 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	K918: 1. Maintenance and /or designee will inspect the diesel emergency power Generator weekly under load for 30 minutes 12 times a year in 20-40 day intervals. Maintenance and/or designee will exercise the generator once for 4 continuous hours within 36 months. 2. All of the facility has the potential to be affected. 3. The Administrator and/or designee will review the regulation with the Maintenance Director for compliance. 4. Maintenance and/or designee will add a PM (preventative Maintenance) Task in the TELS system to flag the generator due dates for inspection and testing. The Maintenance Director and/or Designee will monitor and audit the fire drills quarterly X4. We will take this to the Quality Assurance Committee quarterly X4. 5. Completion Date by 9/22/2022.		