

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

PRINTED: 05/10/2017
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 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 03/13/2017	
NAME OF PROVIDER OR SUPPLIER GOOD SAMARITAN SOCIETY - MOHALL				STREET ADDRESS, CITY, STATE, ZIP CODE 602 E MAIN ST MOHALL, ND 58761			
(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			K 000			
K 300 SS=E	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. NFPA 101 Protection - Other Protection - Other List in the REMARKS section any LSC Section 18.3 and 19.3 Protection requirements that are not addressed by the provided K-tags, but are deficient. This information, along with the applicable Life Safety Code or NFPA standard citation, should be included on Form CMS-2567. This STANDARD is not met as evidenced by: Existing life safety features obvious to the public, if not required by the Code, shall be either maintained or removed. 4.6.12.3 The facility failed to maintain or remove existing life safety features not required by the code. Observation determined: 1) There was a smoke detector from the old fire			K 300	1) Removed 1,2 and 3 previous fire alarm system unit 3/13/17. 2) Checked facility for any other previous fire alarm system equipment and removed 3/17/17. 3) Educated maintenance staff 3/13/17 4) When new fire detection system is installed check entire facility for previous fire detection equipment that will not be used or maintained.		3/17/17

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

TITLE

(X6) DATE

Electronically Signed

03/24/2017

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 300	Continued From page 1 alarm system in the South Nurse Manager Office that was not maintained or removed. 2) There was a heat detector from the old fire alarm system in the Therapy Room that was not maintained or removed. 3) There was a heat detector from the old fire alarm system in the Central Mechanical Room that was not maintained or removed. Failure to maintain or remove existing life safety features not required by the code increases the risk of death or injury due to fire. This deficiency affected three (3) of numerous rooms in the facility.	K 300	5 Date corrective action completed 3/17/17		
K 345 SS=F	NFPA 101 Fire Alarm System - Testing and Maintenance 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. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This STANDARD 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 The facility failed to ensure the fire alarm system was maintained, inspected and tested in	K 345	1) 3/9/17 load voltage test completed. 2) All systems requiring load voltage tests checked and scheduled testing dates in TELS. 3) Educated maintenance staff 3/13/17. 4) Scheduled Semi-annual load voltage		3/20/17

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K 345	Continued From page 2 accordance with NFPA 72, National Fire Alarm and Signaling Code. Fire alarm system batteries shall be subjected to a load voltage test semiannually. NFPA 72, 14.4.2.2 item 5(e). Review of fire alarm system test records indicated the semiannual load voltage tests of the sealed lead acid batteries were not performed as required. The most current fire alarm system batteries load voltage test was conducted on 03/09/2017 and the previous test was conducted on 08/01/2016, exceeding the required semiannual testing requirement. Failure to test and maintain the fire alarm system in accordance with NFPA 72 increases the risk of death or injury due to fire. This deficiency affected one (1) of two (2) required load voltage tests of the fire alarm batteries in the past year. The fire alarm system serves the entire facility.	K 345	tests in TELS 5) Corrective action completed 3/20/17		
K 351 SS=E	NFPA 101 Sprinkler System - Installation 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 sprinklers.	K 351		4/3/17	

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K 351	Continued From page 3 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 STANDARD 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 high-temperature zones shall be of the high-temperature classification. NFPA 13 8.3.2, 8.3.2.5(1), Table 8.3.2.5(a)(2) Observation determined one (1) sprinkler in the Southwest Mechanical Room, one (1) sprinkler in the Southeast Mechanical Room and one (1) sprinkler the Garage installed within 7 ft. of unit heaters were not high-temperature-rated. NFPA 13 requires high-temperature-rated sprinklers within 7 ft. of unit heaters. 2) Sprinklers in walk-in type coolers and freezers with automatic defrosting shall be of the intermediate-temperature classification or higher. NFPA 13 8.3.2, 8.3.2.5(10) Observation determined two (2) sprinklers in the walk-in freezer located in the Kitchen were of	K 351	1) Viking Sprinkler to conduct inspection 4/3/17 and replace current sprinklers with high temp rated sprinklers and intermediate-temp for those indicated. 2) All sprinklers in facility will be inspected by Viking Sprinkler 4/3/17 3) Educated Maintenance staff 3/13/17 4) Viking Sprinkler has set notifications for inspections and scheduled inspections. Scheduled inspections in TELS System. 5) Corrective action completed 4/3/17		

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K 351	Continued From page 4 ordinary-temperature classification. The walk-in freezer was equipped with an automatic defrosting feature.	K 351			
K 353 SS=F	Failure to install and maintain the automatic sprinkler system in accordance with NFPA 13 increases the risk of injury and death due to fire. The deficiency affected five (5) of numerous sprinklers in the facility. The automatic sprinkler system serves the entire facility. NFPA 101 Sprinkler System - Maintenance and Testing 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 STANDARD 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	K 353			4/3/17
			1) Viking Sprinkler to conduct 5 year inspection 4/3/17 2) Schedule next 5 year inspection now with Viking and in TELS system		

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K 353	Continued From page 5 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, 13.4.2.1, 14.2.1 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. Record review and interview with staff determined the check valve inspection and the internal inspection of piping of the automatic sprinkler system had not been conducted in the past five years. 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	3) Educated maintenance staff 3/13/17 4) Schedule notifications for inspections through Viking Sprinkler and TELS 5) Corrective action will be completed 4/3/17		