

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

PRINTED: 08/30/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355041	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING DIVISION OF LIFE SAFETY AND CONSTRUCTION		(X3) DATE SURVEY COMPLETED 08/27/2012
NAME OF PROVIDER OR SUPPLIER LUTHERAN HOME OF THE GOOD SHEPHERD			STREET ADDRESS, CITY, STATE, ZIP CODE 1226 1ST AVE N NEW ROCKFORD, ND 58356		
(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 2000 edition of NFPA 101, Life Safety Code, Chapter 18 - New Health Care Occupancies and Chapter 19 - Existing Health Care Occupancies in compliance with 42CFR 483.70(a). The findings that follow demonstrate noncompliance with these standards. The original building of Lutheran Home of the Good Shepherd was one-story of Type II (111) construction protected with a wet/dry automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. The Garage is separated from the original building by an occupancy separation wall having a two (2) hour fire resistance rating. Two wings (Medora Wing and Angel Wing) of the same construction type were added onto the original building in the late 1980's. A chapel/day care addition of Type V (000) construction was built in 2003. The addition had a wet/dry automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. Attached to the nursing home and chapel/day care addition was an apartment building. A combustible link connected the nursing home and chapel/day care addition to the apartments at an occupancy separation wall having a two (2) hour fire resistance rating. The 2009 and the 2010 additions were Type V (111) construction and protected with a wet/dry automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems.	K 000			

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

TITLE

(X6) DATE

 **Stuart A. Schneider** **CEO/Admin** **9-12-12**

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 062 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5 This STANDARD is not met as evidenced by: The facility failed to ensure the proper position of ceilings in areas protected by the automatic fire sprinkler system. (Heat from a fire stratifies to the ceiling and travels along the ceiling to activate the sprinkler. When ceilings are removed, it delays the activation of the automatic fire sprinkler system.) Observation determined the removal of suspended ceiling tile in the Maintenance Shop affects the activation of the sprinkler system	K 062	1. The missing ceiling tile was replaced immediately (August 27, 2012) upon discovery. 2. A survey of the facility was and will be done ensuring that all ceiling tiles are in place. 3. A policy was created requiring all ceiling tiles to be in place at all times except when access is necessary for maintenance purposes. 4. As part of the quarterly facilities inspection, all ceiling tiles will be inspected to ensure proper positioning of the tiles. 5. The missing ceiling tile that was identified on August 27, 2012 was replaced immediately.	