STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355110	A. BUILDING 01 - MAIN BUILDING 01 B. WING	06/14/2010

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELM CREST MANOR	100 ELM AVE NEW SALEM, ND 58563

(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 19 Existing Health Care Occupancies in compliance with 42 CFR 483.70(a). This facility is located in a one-story building of Type V (000) construction built in 1969 with an addition of Type II (000) construction built in 1990. A main entrance, multipurpose room, garage, Therapy Room and Sun Room of Type V (000) construction were built in 2001. An addition with a partial basement to the north of Type V (000) construction was built in 2009. The building is protected throughout with a dry automatic sprinkler system designed in accordance with NFPA 13, Standard for the Installation of Automatic Sprinkler Systems. Attached to the facility is an assisted living unit. A two-hour fire resistance rated occupancy separation wall was constructed between the assisted living unit and the health care occupancy.	K 000		
K 056 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD If there is an automatic sprinkler system, it is installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, to provide complete coverage for all portions of the building. The system is properly maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. It is fully supervised. There is a reliable, adequate water supply for the system. Required sprinkler systems are equipped with water flow and tamper switches, which are electrically connected to the building fire alarm system. 19.3.5	K 056	NOVA was contacted. They indicated that they will connect from the existing sprinkler line and drop a side wall sprinkler head at the midpoint of the garage door to cover below the garage door at the open position. Nova indicated they will have this work complete by the end of final week of August. Upon completion of the work, we will add both the annunciator panel and sprinkler head to our inspection sheet. We will do this weekly through September 10th and monthly after that. If any added construction would be done we will	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Robert Owens | TITLE: Adm. | (X6) DATE: 7/7/10

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 056	Continued From page 1 This STANDARD is not met as evidenced by: The facility failed to ensure the entire floor area of the Basement had proper coverage by the automatic fire sprinkler system. Observation determined the area below the overhead door was not protected by the automatic fire sprinkler system.	K 056	contact NDSHD and NOVA, our provider of service, to find out needs and sprinklers that would meet requirements. This will be maintained by the Head of Maintenance and the Administrator.	8/6/10
K 069 SS=B	NFPA 101 LIFE SAFETY CODE STANDARD Cooking facilities are protected in accordance with 9.2.3. 19.3.2.6, NFPA 96 This STANDARD is not met as evidenced by: Fire extinguishing systems for commercial cooking operations must meet NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. NFPA 96 requires an inspection and servicing of the fire-extinguishing system be made at least every 6 months by properly trained and qualified persons. The facility failed to inspect and service the fire-extinguishing system at least every 6 months. Review of the records determined the cooking equipment fire extinguishing system was inspected on 03-17-09 and 02-25-10. The time period between each inspections exceeded 6 months.	K 069	The facility did fail to check that the provider of service was doing his job. A new provider will be put in place and the facility will monitor so the time period will never exceed the time frame standards. This new provider with the facility will enter into an agreement to see that this does not occur again. In this case no other area of the facility would be impacted but if a new fire-extinguisher system would be put in place. A monitor sheet will be put in place to trigger 30 days prior, 3 weeks prior, 2 weeks prior, 1 week prior – to contact and see that system is completed on the 6 month rotation. This will be monitored by the maintenance department and Administrator. First sheet will be in place on July 9, 2010.	7/9/10
K 130 SS=F	NFPA 101 MISCELLANEOUS OTHER LSC DEFICIENCY NOT ON 2786	K 130		

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K 130	Continued From page 2 This STANDARD is not met as evidenced by: 1) The emergency generator must be inspected weekly. Maintenance free batteries are not permitted. NFPA 110, 3-5.4.5 Review of records determined documentation of the weekly inspections did not include the battery fluid. Inspection of the battery revealed a maintenance free type without removeable caps was in use. 2) New emergency generator installations must include a remote common audible alarm powered by the storage battery,as specified in NFPA 110 3-5.5.2(d). This remote alarm shall be located outside of the EPS service room at a work site readily observable by personnel. Observation revealed there was a remote annunciator located in the Electrical Room but not at an attended location.	K 130	On 6/17/10 Butler reported to Elm Crest Manor and removed the maintenance free battery. This battery was then replaced with a battery meeting requirements, a battery with removable caps. Elm Crest Manor will include in its weekly inspecting the battery and checking of the battery fluids. Emergency generator annunciator panel will be relocated to nurses station area. The generator will be added to a new checklist sheet and no other area in the facility requires a battery at this time. If a new generator would be added it would be added to the sheet. This will be monitored by the Head of Maintenance and the Administrator.	7/9/10 7/20/10