STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355076	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**06/16/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NORTHWOOD DEACONESS HEALTH CNT	**4 N PARK ST** **NORTHWOOD, ND 58267**

(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 42CFR 483.70(a). The findings that follow demonstrate noncompliance with these standards. The facility was located in a one-story combined Hospital and Long Term Care building of Type III (200) construction that was separated from the two-story rehabilitation/apartment building (east side), one-story clinic building (north side) and one-story assisted living facility (west side) with 2 hour fire resistance rated occupancy separations. The building was protected by a wet automatic sprinkler system designed to meet the requirements of the 1999 edition of NFPA 13, Standard for the Installation of Sprinkler Systems.	K 000		
K 011	NFPA 101 LIFE SAFETY CODE STANDARD If the building has a common wall with a nonconforming building, the common wall is a fire barrier having at least a two-hour fire resistance rating constructed of materials as required for the addition. Communicating openings occur only in corridors and are protected by approved self-closing fire doors. 19.1.1.4.1, 19.1.1.4.2 This STANDARD is not met as evidenced by: The facility failed to ensure communicating openings through a two-hour fire resistant rated occupancy separation wall occur only in corridors. 19.1.1.4.2	K 011	The doorways in x-ray and in medical records will be removed and replaced as follows: We will put in steel studs and two layers of sheetrock on each side.	7/31/15

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 06/18/2015

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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K 011	Continued From page 1 Observation determined: 1) There was a doorway through the two-hour fire resistant rated occupancy separation wall from the Medical Records Storage Room in the hospital to the clinic building. 2) There was a doorway through the two-hour fire resistant rated occupancy separation wall from the X-Ray Room in the hospital to the clinic building. Failure to ensure communicating openings through two-hour fire resistant rated occupancy separation walls occur only in corridors increases the risk of death or injury due to fire. This deficiency affected one (1) of four (4) two-hour fire resistant rated occupancy separation walls in the facility.	K 011	The remainder of the two hour firewalls in the facility will be inspected by the Manager of Facility Services or designee to ensure that there are no doorways within firewalls other than those in corridors. All construction projects will be brought to the Safety, Infection Control, and Risk (SIR) management committee for review. The committee will be educated on this requirement so they are aware of this. The minutes of SIR will be reviewed by the Quality Assurance Committee.	
K 017	NFPA 101 LIFE SAFETY CODE STANDARD Corridors are separated from use areas by walls constructed with at least ½ hour fire resistance rating. In sprinklered buildings, partitions are only required to resist the passage of smoke. In non-sprinklered buildings, walls properly extend above the ceiling. (Corridor walls may terminate at the underside of ceilings where specifically permitted by Code. Charting and clerical stations, waiting areas, dining rooms, and activity spaces may be open to the corridor under certain conditions specified in the Code. Gift shops may be separated from corridors by non-fire rated walls if the gift shop is fully sprinklered.) 19.3.6.1, 19.3.6.2.1, 19.3.6.5	K 017		7/31/15

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	355076	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**06/16/2015**

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NORTHWOOD DEACONESS HEALTH CNT	**4 N PARK ST** **NORTHWOOD, ND 58267**

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K 017	Continued From page 2 This STANDARD is not met as evidenced by: Corridors shall be separated from all other areas by partitions complying with 19.3.6.2 through 19.3.6.5. 19.3.6.1. Exception: Smoke compartments protected throughout by an approved, supervised automatic sprinkler system in accordance with 19.3.5.3 shall be permitted to have spaces that are unlimited in size open to the corridor, provided that the following criteria are met: (a) The spaces are not used for patient sleeping rooms, treatment rooms, or hazardous areas. (b) The corridors onto which the spaces open in the same smoke compartment are protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or the smoke compartment in which the space is located is protected throughout by quick-response sprinklers. (c) The open space is protected by an electrically supervised automatic smoke detection system in accordance with 19.3.4, or the entire space is arranged and located to allow direct supervision by the facility staff from a nurses' station or similar space. (d) The space does not obstruct access to required exits. The facility failed to separate other areas from	K 017	A smoke detector will be put in the kitchenette. The remainder of corridors will be inspected by the Manager of Facility Services or designee to ensure that we meet the required standards of K017. The Manager of Facility Services or designee shall no less than annually inspect all smoke compartments and corridors to ensure compliance with this standard. The Safety, Infection Control, and Risk Management Committee (SIR)will be educated on this requirement so they are aware of this. This will be added to our facility inspection checklists done monthly. The inspection results shall be brought to the Safety, Infection Control, and Risk Management Committee (SIR) with those minutes brought to the Quality Assurance Committee.	

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K 017	Continued From page 3 corridors in accordance with 19.3.6.1. Observation determined the Nutrition Room in the hospital without a door separating the room from the corridor did not have automatic smoke detection and was not located to allow direct supervision by the facility staff from a nurses' station or similar space. Failure to separate corridors from other areas in accordance with 19.3.6.1 increases the risk of death or injury due to fire. This deficiency affected one (1) of numerous exit corridors in the facility.	K 017		