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 _____	**04/13/2016**

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 a two-story rehabilitation/apartment building (east side), a one-story clinic building (north side) and a 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 052 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD A fire alarm system required for life safety shall be, tested, and maintained in accordance with NFPA 70 National Electric Code and NFPA 72 National Fire Alarm Code and records kept readily available. The system shall have an approved maintenance and testing program complying with applicable requirement of NFPA 70 and 72. 9.6.1.4, 9.6.1.7, This STANDARD is not met as evidenced by: Record review determined the facility failed to test the fire alarm system in accordance with NFPA 72 National Fire Alarm Code. Review of the annual fire alarm system inspection report done by an outside company on 10/2/2015 indicated the following devices were not tested during the annual inspection:	K 052	The fire alarm system will be tested and maintained in accordance with NFPA 70 and NFPA 72 with appropriate documentation maintained attesting to this. As part of the testing, all required devices will be tested during this annual inspection.	4/21/16

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

Electronically Signed | 04/21/2016

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 _____	**04/13/2016**

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K 052	Continued From page 1 1- Fifty seven (57) of fifty seven (57) audible alarm devices. 2- Twenty (20) of twenty (20) visual alarm devices. 3- Thirty nine (39) of thirty nine (39) door hold devices. Failure to test the fire alarm system as required by NFPA 72 increases the risk of injury or death due to fire. This deficiency affects the fire alarm system which serves the entire building.	K 052	The fire alarm system covers the entire facility so there are no other portions of the facility affected by the same practice. However, we will review other required annual inspections to life safety to ensure compliance with regulations. The facility safety, infection control, and risk management committee will have on the routine meeting agenda review of required annual maintenance reports. The purpose of it on the agenda will be to review compliance of these reports with life safety regulations. The manager of Facility Services will bring and review the results of the inspection reports to the committee. The actions and minutes of this committee are reported to and reviewed by the QA committee on a monthly basis.	