

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

PRINTED: 03/20/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355044		(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/20/2019	
NAME OF PROVIDER OR SUPPLIER MOUNTRAIL BETHEL HOME				STREET ADDRESS, CITY, STATE, ZIP CODE 615 6TH ST SE STANLEY, ND 58784			
(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 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. This facility was located in a one-story building with a partial basement. The building was of Type II (000) construction protected with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems. The following were attached to the facility and separated by occupancy separation walls having a two-hour fire resistance rating: 1) Attached to the north were Independent Living Apartments. 2) Attached to the south was a pool wing Aquatic Center. 3) Attached to the west was a one-story hospital.			K 000			
K 351 SS=D	Sprinkler System - Installation CFR(s): NFPA 101 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			K 351			9/27/19

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

TITLE

(X6) DATE

Electronically Signed

08/29/2019

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 351	Continued From page 1 protection measures are permitted to be substituted for sprinkler protection in specific areas where state or local regulations prohibit sprinklers. 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 REQUIREMENT 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. 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 one (1) sprinkler in the walk-in freezer located in the Dining Room was of ordinary-temperature classification. The walk-in freezer was equipped with an automatic defrosting feature. Failure to install and maintain the automatic sprinkler system in accordance with NFPA 13 increases the risk of injury and death due to fire.			K 351	1. Sprinkler head in the walk-in cooler will be replaced with the proper temperature sprinkler head to meet NFPA 13 code. 2. Inspection of the facility will be completed making sure all sprinkler heads comply with NFPA 13. 3. If sprinkler heads are replaced or new sprinkler heads are added to the system, an inspection of the sprinkler(s) will be completed prior to installation, making sure it is the proper head(s) in accordance with NFPA 13. 4. Inspection of all sprinkler heads will be completed monthly by Plant Operations personnel and yearly by an outside sprinkler company.		

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K 351	Continued From page 2			K 351			
K 355 SS=F	The deficiency affected one (1) of numerous sprinklers in the facility. The automatic sprinkler system serves the entire facility. Portable Fire Extinguishers CFR(s): NFPA 101 Portable Fire Extinguishers Portable fire extinguishers are selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. 18.3.5.12, 19.3.5.12, NFPA 10 This REQUIREMENT is not met as evidenced by: Portable fire extinguishers shall be provided in all health care occupancies. Extinguishers shall be selected, installed, inspected, and maintained in accordance with NFPA 10, Standard for Portable Fire Extinguishers. 19.3.5.12, 9.7.4.1 Fire extinguishers having a gross weight not exceeding 40 lb. (18.14 kg) shall be installed so that the top of the fire extinguisher is not more than 5 ft (1.53 m) above the floor. Fire extinguishers having a gross weight greater than 40 lb. (18.14 kg) (except wheeled types) shall be installed so that the top of the fire extinguisher is not more than 3 1/2 ft (1.07 m) above the floor. In no case shall the clearance between the bottom of the hand portable fire extinguisher and the floor be less than 4 in. (102 mm). NFPA 10 6.1.3.8.1, 6.1.3.8.2, 6.1.3.8.3 The facility failed to install fire extinguishers in accordance with NFPA 10. Observation determined portable fire			K 355	1. All fire extinguishers which are over five feet above the floor will be lowered to meet NFPA 10 standards. 2. Plant Operations personnel will inspect all fire extinguishers within the facility making sure they are in compliance with NFPA 10 standard height requirements. 3. Height requirements for fire extinguishers will now be part of the monthly preventive maintenance schedule. 4. All fire extinguishers will be inspected monthly by plant personnel and once a year by an outside fire extinguisher company. Any fire extinguishers installed or moved will be mounted to meet NFPA 10 standards.		8/23/19

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K 355	Continued From page 3 extinguishers throughout the facility were installed with the top of the extinguisher more than 5 ft. above the floor. Failure to install fire extinguishers in accordance with NFPA 10 increases the risk of injury or death due to fire. The deficiency affected numerous fire extinguishers in the facility.	K 355			