

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

PRINTED: 01/04/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355034		(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____		(X3) DATE SURVEY COMPLETED 08/29/2017	
NAME OF PROVIDER OR SUPPLIER TIOGA MEDICAL CENTER LTC				STREET ADDRESS, CITY, STATE, ZIP CODE 810 N WELO ST TIOGA, ND 58852			
(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. The Tioga Medical Center LTC was a combined hospital and skilled nursing facility located in a one-story building of Type II (000) construction with a basement. A clinic was attached to the west side of the Tioga Medical Center and was separated by an occupancy separation wall having a two-hour fire resistance rating. A one-story apartment building was attached to the east side of the facility and was separated by an occupancy separation wall having a two-hour fire resistance rating.			K 000			
K 291 SS=D	Emergency Lighting CFR(s): NFPA 101 Emergency Lighting Emergency lighting of at least 1-1/2-hour duration is provided automatically in accordance with 7.9.18.2.9.1, 19.2.9.1 This REQUIREMENT is not met as evidenced by: Testing of required emergency lighting systems shall be permitted to be conducted as follows: 1) Functional testing shall be conducted monthly, with a minimum of 3 weeks and a maximum of 5 weeks between tests, for not less than 30 seconds. 2) The test interval shall be permitted to be extended beyond 30 days with the approval of			K 291	1. Emergency lighting was tested to ensure it provides 1 hour of illumination. 2. No other areas have the same potential to be affected. 3. If any new emergency lighting is added; TMC will ensure that functional testing is done and documented. Maintenance staff was educated. 4. Plant Director or his designee will		10/13/17

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

TITLE

(X6) DATE

Electronically Signed

09/15/2017

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 291	Continued From page 1 the authority having jurisdiction. 3) Functional testing shall be conducted annually for a minimum of 1½ hours if the emergency lighting system is battery powered. 4) The emergency lighting equipment shall be fully operational for the duration of the tests. 5) Written records of visual inspections and tests shall be kept by the owner for inspection by the authority having jurisdiction. 7.9.3.1.1 The facility failed to ensure the emergency lighting was in proper operating condition to provide 1½ hours of emergency illumination in the event of failure of normal lighting. Records review determined monthly and annual testing of the emergency battery-powered emergency light at the LTC generator location was not documented. Failure to test and maintain the emergency lights in accordance with NFPA 101 increases the risk of death or injury due to fire. The deficiency affected one (1) of three (3) emergency battery back-up lights in the building.	K 291	monitor weekly X 4, then monthly X3, then prn unless determined otherwise by the QA committee. 5. 10/13/2017		
K 345 SS=F	Fire Alarm System - Testing and Maintenance CFR(s): NFPA 101 Fire Alarm System - Testing and Maintenance A fire alarm system is tested and maintained in accordance with an approved program complying with the requirements of NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm and Signaling Code. Records of system acceptance, maintenance and testing are readily available.	K 345		10/13/17	

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K 345	Continued From page 2 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by: Health care occupancies shall be provided with a fire alarm system in accordance with Section 9.6. 19.3.4.1 The facility failed to ensure the fire alarm system was maintained, inspected and tested in accordance with NFPA 72, National Fire Alarm and Signaling Code. Fire alarm system batteries shall be subjected to a load voltage test semiannually. NFPA 72, 14.4.2.2 item 5(e). Review of fire alarm system test records indicated the semiannual load voltage tests of the sealed lead acid batteries were not performed as required. A load voltage test of the fire alarm system batteries was done during the annual inspection by an outside company on 08/30/2016. Records did not indicate any other load voltage test on the fire alarm system batteries in the past year. Failure to test and maintain the fire alarm system in accordance with NFPA 72 increases the risk of death or injury due to fire. This deficiency affected one (1) of two (2) required load voltage tests of the fire alarm batteries in the past year. The fire alarm system serves the entire facility.	K 345	1. Load voltage tests of the sealed lead acid batteries in the fire alarm system were tested and documented. 2. No other areas have the same potential to be affected. 3. All batteries were labeled and a checklist developed. If any new fire alarm batteries are added TMC will ensure they are labeled and testing is completed. Maintenance staff was educated. 4. Plant Director or his designee will monitor weekly X 4, then monthly X3, then prn unless determined otherwise by the QA committee. 5. 10/13/17		

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K 712 SS=F	Fire Drills CFR(s): NFPA 101 Fire Drills Fire drills include the transmission of a fire alarm signal and simulation of emergency fire conditions. Fire drills are held at unexpected times under varying conditions, at least quarterly on each shift. The staff is familiar with procedures and is aware that drills are part of established routine. Responsibility for planning and conducting drills is assigned only to competent persons who are qualified to exercise leadership. Where drills are conducted between 9:00 PM and 6:00 AM, a coded announcement may be used instead of audible alarms. 18.7.1.4 through 18.7.1.7, 19.7.1.4 through 19.7.1.7 This REQUIREMENT is not met as evidenced by: Drills shall be conducted quarterly on each shift to familiarize facility personnel with the signals and emergency action required under varied conditions. 19.7.1.6 The facility failed to conduct fire drills as required. Fire drill records review determined the last six (6) fire drills for the Day shift occurred at 10:40 am, 7:02 am, 10:30 am, 9:45 am, 10:15 am and 9:40 am. Fire drills are required to be conducted under varied conditions. The condition of the time of the day was not varied. Five (5) fire drills in the past year all occurred at times within 60 minutes of each other in a 12 hour shift. Failure to conduct fire drills as required increases	K 712	1. Fire drill was done and will continue to be done on a monthly basis, rotating shifts. 2. No other areas have the same potential to be affected. 3. Fire drill schedule was adjusted to reflect varied time of the day. Maintenance staff was educated. 4. Plant Director or his designee will monitor monthly X6, then prn unless No other areas have the potential. 5. 10/13/17	10/13/17	

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K 712	Continued From page 4 the risk of death or injury due to fire.	K 712			
K 916 SS=F	The deficiency affected five (5) of twelve (12) drills in the past year. Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Alarm Annunciator A remote annunciator that is storage battery powered is provided to operate outside of the generating room in a location readily observed by operating personnel. The annunciator is hard-wired to indicate alarm conditions of the emergency power source. A centralized computer system (e.g., building information system) is not to be substituted for the alarm annunciator. 6.4.1.1.17, 6.4.1.1.17.5 (NFPA 99) This REQUIREMENT is not met as evidenced by: A remote annunciator that is storage battery powered shall be provided to operate outside of the generating room in a location readily observed by operating personnel at a regular work station. The annunciator shall be hard-wired to indicate alarm conditions of the emergency or auxiliary power source as follows: 1) Individual visual signals shall indicate the following: a) When the emergency or auxiliary power source is operating to supply power to load b) When the battery charger is malfunctioning 2) Individual visual signals plus a common audible signal to warn of an engine-generator alarm condition shall indicate the following: a) Low lubricating oil pressure b) Low water temperature	K 916	1. Cummins Deisel was contacted and will be coming to either repair or replace the system. 2. No other areas have the same potential to be affected. 3. If any new electrical systems with annunciators are added; TMC will ensure that functional testing is done and documented. Maintenance staff was educated. 4. Plant Director or his designee will monitor weekly X 4, then monthly X5, then prn unless determined otherwise by the QA committee QA will be done checking that switch is on and annunciator is functioning. 5. 10/13/2017	10/13/17	

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K 916	Continued From page 5 c) Excessive water temperature d) Low fuel when the main fuel storage tank contains less than a 4-hour operating supply e) Overcrank (failed to start) f) Overspeed NFPA 99 6.4.1.1.17 The facility failed to ensure the emergency generator was in compliance with NFPA 99, Standard for Health Care Facilities. Observation determined the remote annunciator alarm-silencing switch for the LTC generator was in the (off) position and gave a false low volume alarm when switched to the (on) position. Failure to ensure the emergency generator was in compliance with NFPA 99 increases the risk of death or injury due to fire. The deficiency affected one (1) of two (2) emergency generators which provide all emergency power to the facility.	K 916			
K 918 SS=F	Electrical Systems - Essential Electric Syste CFR(s): NFPA 101 Electrical Systems - Essential Electric System Maintenance and Testing The generator or other alternate power source and associated equipment is capable of supplying service within 10 seconds. If the 10-second criterion is not met during the monthly test, a process shall be provided to annually confirm this capability for the life safety and critical branches. Maintenance and testing of the generator and transfer switches are performed in accordance with NFPA 110. Generator sets are inspected weekly, exercised	K 918		10/13/17	

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K 918	Continued From page 6 under load 30 minutes 12 times a year in 20-40 day intervals, and exercised once every 36 months for 4 continuous hours. Scheduled test under load conditions include a complete simulated cold start and automatic or manual transfer of all EES loads, and are conducted by competent personnel. Maintenance and testing of stored energy power sources (Type 3 EES) are in accordance with NFPA 111. Main and feeder circuit breakers are inspected annually, and a program for periodically exercising the components is established according to manufacturer requirements. Written records of maintenance and testing are maintained and readily available. EES electrical panels and circuits are marked and readily identifiable. Minimizing the possibility of damage of the emergency power source is a design consideration for new installations. 6.4.4, 6.5.4, 6.6.4 (NFPA 99), NFPA 110, NFPA 111, 700.10 (NFPA 70) This REQUIREMENT is not met as evidenced by: Generator sets shall be tested 12 times a year, with testing intervals of not less than 20 days nor more than 40 days. Generator sets serving essential electrical systems shall be tested in accordance with NFPA 110, Standard for Emergency and Standby Power Systems. EPSSs, including all appurtenant components, shall be inspected weekly and exercised under load at least monthly. Diesel generator sets in service shall be exercised at least once monthly, for a minimum of 30 minutes, using one of the following methods: (1) Loading that maintains the minimum exhaust gas temperatures as recommended by the	K 918	1. Generator supplemented load test will be completed on 9/13/17. 2. No other areas have the same potential to be affected. 3. If any new generators are added; TMC will ensure that load testing is done as per regulation and documented. Maintenance staff was educated. 4. Plant Director or his designee will check yearly to ensure that the load test has been completed. A calendar invite will be initiated from the QA Director to the Plant Director to monitor yearly. 5. 10/13/17		

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K 918	Continued From page 7 manufacturer. (2) Under operating temperature conditions and at not less than 30 percent of the EPS nameplate kW rating. Diesel-powered EPS installations that do not meet the requirements shall be exercised monthly with the available EPSS load and shall be exercised annually with supplemental loads at not less than 50 percent of the EPS nameplate kW rating for 30 continuous minutes and at not less than 75 percent of the EPS nameplate kW rating for 1 continuous hour for a total test duration of not less than 1.5 continuous hours. NFPA 99 6.4.4.1.1.4, NFPA 110 8.4.1, 8.4.2, 8.4.2.3 The facility failed to ensure the emergency generator was in compliance with NFPA 99 and NFPA 110. Review of generator test records did not indicate that the minimum exhaust temperature provided by the manufacturer was achieved and that the monthly exercise of the Hospital diesel generator loaded the generator to at least 30 percent (75 kW) of the nameplate rating. The nameplate rating of the generator was 250 kW. The facility did not perform annual supplemental load exercises as required when diesel generators are not loaded to 30 percent of nameplate rating or manufacturer's recommended temperature is achieved during the required monthly exercises. Failure to inspect and maintain emergency	K 918			

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K 918	Continued From page 8 generators in accordance with NFPA 99 and NFPA 110 increases the risk of death or injury due to fire. The deficiency affected one (1) of two (2) emergency generators which provide all emergency power to the facility.	K 918			