STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355077	A. BUILDING 01 - MAIN BUILDING 01 B. WING	03/03/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHEYENNE CARE CENTER	979 CENTRAL AVE N VALLEY CITY, ND 58072

(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 18 New Health Care Occupancies and Chapter 19 Existing Health Care Occupancies in compliance with 42 CFR 483.70(a). The findings that follow demonstrate noncompliance with these standards. The facility was comprised of three separate buildings: 1) The original 1957 four-story building was of Type II (222) construction with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. Attached to the east side of the original four-story building was a three-story addition which was constructed in 1988. The three-story structure was of Type III (211) construction equipped with an automatic sprinkler system designed to meet the requirements of NFPA 13. This addition had a wood roof. The wood framed roof has two layers of 5/8 "Type X" gypsum board attached to the bottom of the rafters. This downgrades the construction from Type II (222) to Type III (211). 2) Attached to the north side of the original four-story building was a one-story building of Type II (111) construction with a wet automatic sprinkler system designed to meet the requirements of NFPA 13. The two buildings were separated by a wall having a two-hour fire resistance rating. 3) Attached to the north end of the one-story building was a one-story addition built in 2006 of Type V (111) construction with an automatic	K 000		

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

Craig Thompson | CEO | 3-10-15

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.

emailed 3-12-15

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K 000	Continued From page 1 sprinkler system designed to meet the requirements of NFPA 13. The buildings were separated by a wall having a two-hour fire resistance rating. The 2006 addition was surveyed using Chapter 18 New Health Care Occupancies. Note: The Fire Safety Evaluation System (FSES) was used as an alternative safety method for Tag K 012 Construction Type for the 03/03/2015 Life Safety Code survey. The facility passes the FSES when all other deficiencies are corrected.	K 000		
K 012 SS=B	NFPA 101 LIFE SAFETY CODE STANDARD Building construction type and height meets one of the following. 19.1.6.2, 19.1.6.3, 19.1.6.4, 19.3.5.1 This STANDARD is not met as evidenced by: The facility failed to provide a structure that meets the requirements of the Life Safety Code. Observation determined the 1988 three-story addition of Type II (222) construction with an automatic sprinkler system was built with a wood framed roof. The wood framed roof has two layers of 5/8 "Type X" gypsum board attached to the bottom of the rafters. This downgrades the construction to Type III (211). The three-story addition with a wood framed roof exceeded the allowable height for the construction type.	K 012	A Fire Safety Evaluation System (FSES) was used for Tag K 012 Building Construction Type compliance as a result of the 03/03/2015 Life Safety Code survey. The facility passes the FSES upon correction of all other deficiencies.	3/3/15
K 056 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD	K 056		

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K 056	Continued From page 2 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 This STANDARD is not met as evidenced by: Automatic fire sprinkler systems must be installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems. Ordinary-temperature-rated sprinklers shall be used throughout buildings. NFPA 13 Section 5-3.1.4.1 The facility failed to ensure ordinary-temperature-rated sprinklers were used throughout the building or provide adequate documentation of high ceiling temperatures where intermediate-temperature sprinklers were installed. Observation determined the sprinklers in the Laundry Room and the Air Handler Room located south of the Laundry Room were not ordinary-temperature-rated, but were intermediate-temperature-rated. The sprinklers were green color coded which is an indication of	K 056	**K 056 NFPA 101 Life Safety Code Standard – Sprinkler System** 1. Sprinkler heads in the Laundry room and the Air Handler Room located south of the laundry room will be replaced with ordinary-temperature-rated sprinkler heads. 2. A check of all sprinkler heads will be completed in both building, assuring that all sprinkler heads are meeting the NFPA 13 Standards. 3. Environment Service will monitor and review all installation and additions of new sprinkler heads ensuring that NFPA 13 Standards are met. 4. Environmental Service Coordinator will review all plans prior to installation of all new sprinkler heads. 5. Corrective action will be completed by 4/17/2015.	4/17/15

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K 056	Continued From page 3 an intermediate-temperature-rating. These sprinklers are to be used only when the maximum ceiling temperature exceeds 100°F but does not exceed 150°F. Failure to install the automatic sprinkler system in accordance with NFPA 13 increases the risk of injury and death due to fire. The deficiency affected two (2) of numerous locations protected by the automatic sprinkler system, which serves the entire facility.	K 056		
K 144 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1. This STANDARD is not met as evidenced by: The facility failed to ensure the emergency generator was in compliance with NFPA 110, Standard for Emergency and Standby Power Systems. Record review determined the specific gravity of the emergency generator battery was not checked at seven (7) day intervals as required. Failure to inspect and maintain the emergency generator in accordance with NFPA 110 increases	K 144	**K 144 NFPA 101 Life Safety Code Standard – Generators are inspected weekly** **1.** A check of the specific gravity in all emergency generator batteries will be completed and documented. **2.** All related emergency batteries for generators will be added to the weekly preventative maintenance inspection checks. Weekly documentation will be maintained. **3.** All maintenance staff will be educated and trained to review and complete inspections on all specific gravity emergency battery. Also, Envir. Serv. Coord will establish on his Outlook calendar the same PM inspection schedule so it reminds him that checks need to be completed. **4.** Environmental Service Coordinator will establish a Q.A. that will monitor inspections on a quarterly basis. **5.** Completion Date April 17th, 2015	4/17/15

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K 144	Continued From page 4 the risk of death or injury due to fire. The deficiency affected two (2) of two (2) emergency generators which provide all emergency power to the facility.	K 144		