STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355109	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**02/02/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SOURIS VALLEY CARE CENTER	**300 MAIN ST S** **VELVA, ND 58790**

(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 building of Type V (000) construction that was protected by a wet and dry automatic fire sprinkler system designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems. The nursing facility was separated from an attached apartment building by an occupancy separation wall having a two-hour fire resistance rating.	K 000		
K 038 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1 This STANDARD is not met as evidenced by: Means of egress must be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency. The width of means of egress shall be measured in the clear at the narrowest point of the exit component under consideration. Exception: Projections not more than 3 1/2 in. (8.9 cm) on each side shall be permitted at 38 in. (96 cm) and below. 7.1.10.1, 7.3.2 The facility failed to keep corridors free of obstructions. Observation determined a popcorn popper on a wheeled cart was located in the south exit	K 038	Preparation of execution of this response and plan of correction does not constitute an admission by the provider of the truth of the facts alleged or conclusions set forth in this statement of deficiencies. The Plan of correction is prepared and/or executed solely because it is required by the provisions of Federal and State law. For the purpose of any allegation that facility is not in substantial compliance with the Federal requirements of participation, this response and plan of correction constitutes the facility's allegation of compliance in accordance with section 7305 of the State Operations Manual.	2/19/16

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

Electronically Signed | 02/22/2016

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K 038	Continued From page 1 corridor adjacent to the kitchen. This deficiency affected exit access to one (1) of five (5) exits from the facility.	K 038	1. Facility will keep means of egress free of all obstructions or impediments to the full instant use in the case of fire or other emergency's. Popcorn machine has been relocated to an appropriate place within the facility. 2. All residents have potential to be affected. It affected one(1) of five (5) exits from the facility. 3. All staff will be re-educated on maintaining hallways and exits free from obstructions or impediments. 4. QA committee or Designee will audit egresses free of all obstruction to make sure we are in compliance. The audit report will be reviewed at QA meeting to determine if there is need for further auditing or training.	
K 050 SS=D	NFPA 101 LIFE SAFETY CODE STANDARD 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. 18.7.1.2, 19.7.1.2 This STANDARD 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	K 050	1. Fire Drills will be conducted on each shift per regulation. 2. All residents have potential to be	2/19/16

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K 050	Continued From page 2 conditions. 19.7.1.2 The facility failed to conduct fire drills as required. Fire drill records review determined the facility failed to conduct a PM Shift fire drill during the third quarter of 2015. Failure to conduct fire drills as required increases the risk of death or injury due to fire. The deficiency affected one (1) of twelve (12) drills in the past year.	K 050	affected. It affected 1 of 12 drills in the past year. 3. Maintenance staff will be in serviced on Fire Drill regulation. Fire Drill are held at unexpected times under varying conditions, at least quarterly on each shift. 4. QA Coordinator or Designee will responsible for monthly audits to ensure fire drills are being done per regulation. The audit reports will be monitored through QA meetings to determine if there is a need for further auditing or training.	
K 062 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5 This STANDARD is not met as evidenced by: Automatic fire pumps and special service pumps shall be supervised in accordance with NFPA 20, Standard for the Installation of Stationary Pumps for Fire Protection, NFPA 72 National Fire Alarm Code 1999 Edition, 1-5.8.1, 3-8.3.2.5.2. 3-8.3.3.2 The integrity of each fire suppression system actuating device and its circuit shall be supervised. Supervised conditions should include electric fire pumps, including running (alarm or supervisory), power failure, and phase reversal. Where provided, the suction valve, discharge valve, bypass valves, and isolation valves on the backflow prevention device or assembly shall be supervised open by one of the following methods:	K 062	1. Center will be installing an audible signal at the nurses station. We are also going to be wiring so it will also be monitored by our Fire Panel Midwest Alarms. We are asking for an extension on the tag due to parts and service techn. not being able to get have it done by 2/19/2016. 2. All residents have potential of being affected. 3. Maintenance staff will be in-serviced on sprinkler system requirements to ensure we are in compliance. 4. Maintenance staff or designee will preform weekly audits on fire pumps to ensure proper signal is being maintained. After three months if fire pump is properly	2/29/16

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K 062	Continued From page 3 (1) Central station, proprietary, or remote station signaling service. (2) Local signaling service that will cause the sounding of an audible signal at a constantly attended point. (3) Locking valves open. (4) Sealing of valves and approved weekly recorded inspection where valves are located within fenced enclosures under the control of the owner. Fire pump supervision contacts to be provided by the fire pump control equipment. Provide individual monitoring points, modules and wiring to the fire alarm system. NFPA 20, 2-11 Valve Supervision. Trouble alarms shall be provided for the following: a) Fire pump disconnect open. b) Fire pump not in automatic mode. c) Fire pump derangement. d) Fire pump on. e) Fire pump power failure. Records review determined the electrically powered automatic sprinkler pump was not supervised by the fire alarm system. Failure to ensure the automatic fire pump is monitored/supervised by the fire alarm system increases the risk of injury and death.	K 062	working per regulation it will be continued monitored through QA committee. QA committee will review at QA meetings to determine if there is need for further auditing or training.	

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K 062	Continued From page 4 This deficiency affects the entire facility.	K 062		
K 147 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD Electrical wiring and equipment shall be in accordance with National Electrical Code. 9-1.2 (NFPA 99) 18.9.1, 19.9.1 This STANDARD is not met as evidenced by: When electrical hazards are identified, measures to abate such conditions shall be taken. 1) Working space for equipment operating at 600 volts, nominal, or less to ground and likely to require examination, adjustment, servicing, or maintenance while energized shall be at least three (3) feet. 1999 NFPA 70, section 110.26(a) (1), (2), and (3). The facility failed to ensure adequate clearance was maintained between twenty-five (25) electrical panels and combustible storage. Observation determined cardboard boxes were stored adjacent to the front of electrical panels in the Mechanical Room. Failure to identify and abate electrical hazards increases the risk of injury and death. This deficiency affected the entire facility. 2) All branch circuits serving resident care areas shall be provided with a ground path for fault current by installation in a metal raceway system, or a cable armor or sheath assembly. 517.13. The facility failed to ensure that electrical wiring was run in protective raceways and electrical	K 147	1. The mechanical room has be proper ensure adequate clearance between electrical panels and combustible storage. Cardboard boxes have been removed and are stored in appropriate place. 2)Exposed electrical conductors and unprotected wire above the water heater have been proper fixed per regulation. 3) One (1) power strip was removed per regulations. East hallways bathroom GFCI was replaced and is in proper operating manner per regulation. 2. All residents have potential of being affected. One(1) of numerous GFCI protected receptacles in the facility was affected. 3. Maintenance staff will be in-serviced on electrical wiring and equipment shall be in accordance with National Electrical Code. 4. Maintenance staff or designee will do random weekly audits on GFCI, and power strips to ensure we are in compliance for three months. The audits will be reviewed at QA meetings to determine if there is a need for further auditing or training.	2/19/16

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K 147	Continued From page 5 connections are within approved junction boxes. Observation determined exposed electrical conductors protruding from a metal conduit in the Mechanical Room did not terminate in a junction box. The conductors had wire nuts applied and were hanging unprotected above the water heater. Failure to identify and abate electrical hazards increases the risk of injury and death. This deficiency affected the entire facility. 3) Multiplug adapters, extension cords, cube adapters, and other devices used as a substitute for permanent wiring shall not be used. 1999 NFPA 70, section 6-1.5. The facility failed to ensure powerstrips were not in use as a substitute for permanent wiring. Observation determined an electrical powerstrip was in use to provide electricity to a fan and radio in the Health Information Management Office. Failure to ensure the electrical wiring complies with NFPA 70 increases the risk of injury and death due to fire. The deficiency affected one (1) powerstrip used inappropriately in place of permanent wiring in the facility. 4) Ground-fault protection for operation of the service and feeder disconnecting means shall be fully selective such that the feeder device and not	K 147		

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K 147	Continued From page 6 the service device shall open on ground faults on the load side of the feeder device. A six-cycle minimum separation between the service and feeder ground-fault tripping bands shall be provided. Operating time of the disconnecting devices shall be considered in selecting the time spread between these two bands to achieve 100 percent selectivity. 1999 NFPA 70, section 517.17(b) Ground fault circuit interrupters (GFCIs) were not maintained in operable condition. Observation determined the GFCI located in the East Wing Bathing Room failed to reset when tripped. Failure to ensure the electrical wiring complies with NFPA 70 increases the risk of injury and death due to fire. The deficiency affected one (1) of numerous GFCI protected receptacles in the facility.	K 147		