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 _____	**03/07/2018**

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 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 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 211 SS=F	Means of Egress - General CFR(s): NFPA 101 Means of Egress - General Aisles, passageways, corridors, exit discharges, exit locations, and accesses are in accordance with Chapter 7, and the means of egress is continuously maintained free of all obstructions to full use in case of emergency, unless modified by 18/19.2.2 through 18/19.2.11. 18.2.1, 19.2.1, 7.1.10.1 This REQUIREMENT is not met as evidenced by: Openings required to have a fire protection rating by Table 8.3.4.2 shall be protected by approved, listed, labeled fire door assemblies and fire window assemblies and their accompanying hardware, including all frames, closing devices, anchorage, and sills in accordance with the requirements of NFPA 80,	K 211	Preparation and execution of this response and plan of correction does not constituent and admission of agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed	4/21/18

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

Electronically Signed | 03/27/2018

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 _____	**03/07/2018**

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K 211	Continued From page 1 Standard for Fire Doors and Other Opening Protectives, except as otherwise specified in this code. 8.3.3.1. Fire-rated door assemblies shall be inspected and tested in accordance with NFPA 80, Standard for Fire Doors and Other Opening Protectives. 7.2.1.15.2 The facility failed to inspect and test all fire rated door assemblies throughout the facility. Review of documentation and interview with staff determined not all fire rated door assemblies had been inspected in the past year. Failure to inspect and test fire rated door assemblies increases the risk of injury or death due to fire. This deficiency affected numerous fire rated door assemblies throughout the facility.	K 211	solely because it is required by the provisions of Federal and State law. For the purpose of any allegations that the facility is not in substantial compliance with 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. 1. Facility has inspected and test all fire rated door assemblies through the facility. 2. All door that have a fire rating would be affected. 3. Maintenance or designee will inspect and document all fire rated door to ensure we are in compliance. 4.QA committee will monitor inspected doors and ensure documentation is measured during the QA process for compliance.	
K 291 SS=F	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.	K 291	1.The Facility has removed the one emergency lighting that had provided battery powered back up. 2. This deficiency has the potentialto affected all emergency battery back-up lights throughout the building. 3. Maintenance or designee will monitor	4/21/18

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K 291	Continued From page 2 2) The test interval shall be permitted to be extended beyond 30 days with the approval of 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 lighting system 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 all emergency battery back-up lights throughout the building.	K 291	to ensure that emergency lighting systems are followed per compliance. 4. QA committee will review and monitor emergency lighting system to ensure compliance.	
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	K 345		4/21/18

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K 345	Continued From page 3 available. 9.6.1.3, 9.6.1.5, NFPA 70, NFPA 72 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 A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with the applicable requirements of NFPA 70, National Electrical Code, and NFPA 72, National Fire Alarm and Signaling Code. 9.6.1.3. 2010 NFPA 72, 14.6.2.4, Figure 14.6.2.4 Section 7.12-7.14 and page 11 The facility failed to test the fire alarm system as required. Review of fire alarm system test records indicated device test results (alarm initiating, supervisory alarm initiating, and notification) did not provide an itemized list with the device type, address, location, and test result as required. 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 all initiating and notification devices. The fire alarm system serves the entire facility.	K 345	1. Fire alarm system company has been out and provided an itemized list with the device type, address, location, and test result as required. 2. This deficiency has the potential to affect the entire facility. 3. Maintenance or designee will ensure that a fire alarm system is tested and maintained in accordance with an approved program complying with the NFPA 70, National Electric Code, and NFPA72. 4. QA committee will complete review to ensure that facility providing an itemized list with he device type, address, location, and test results as required.	
K 351 SS=E	Sprinkler System - Installation CFR(s): NFPA 101 Spinkler System - Installation 2012 EXISTING Nursing homes, and hospitals where required by	K 351		4/21/18

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K 351	Continued From page 4 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 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) Sprinklers in the high-temperature zone shall be of the high-temperature classification, and sprinklers in the intermediate-temperature zone shall be of the intermediate-temperature classification. NFPA 13 8.3.2, 8.3.2.5(1), Table 8.3.2.5(a)(2) 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. 1) NFPA 13 requires high-temperature-rated sprinklers within a 7 ft. radius cylinder extending	K 351	1.a) One (1) sprinkler in the Transfer Switch Room installed within 7 ft. of unit heaters was not high-temperature-rated. Sprinkler has been removed. b) One (1) sprinkler in the Mechanical Room installed within 7 ft. of unit heaters was not high-temperature-rated. Heater in the mechanical room has been disconnected. (c) sprinkler in the Mechanical Room installed between 7 ft. and 20 ft. on the discharge side of horizontal discharge unit heaters was not intermediate-temperature-rated. Sprinkler has been replaced with a intermediate temperature rating. (d)(1) sprinkler in the walk-in freezer located in the Kitchen was of ordinary-temperature classification. The	

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K 351	Continued From page 5 7 ft. above and 2 ft. below horizontal discharge unit heaters. Observation determined: a) One (1) sprinkler in the Transfer Switch Room installed within 7 ft. of unit heaters was not high-temperature-rated. b) One (1) sprinkler in the Mechanical Room installed within 7 ft. of unit heaters was not high-temperature-rated. 2) NFPA 13 requires intermediate-temperature-rated sprinklers within a 7 ft. to 20 ft. radius pie-shaped cylinder extending 7 ft. above and 2 ft. below horizontal discharge heaters on the discharge side; also a 7 ft. radius cylinder more than 7 ft. above horizontal discharge unit heaters. Observation determined one (1) sprinkler in the Mechanical Room installed between 7 ft. and 20 ft. on the discharge side of horizontal discharge unit heaters was not intermediate-temperature-rated. 3) 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 Kitchen was of ordinary-temperature classification. The walk-in freezer was equipped with an automatic defrosting feature. Failure to install and maintain the automatic	K 351	walk-in freezer was equipped with an automatic defrosting feature. Sprinkler was replaced with an intermediate-temperature rating. 2. The deficiency affected four (4) of numerous sprinklers in the facility. The automatic sprinkler system serves the entire facility. 3. Maintenance or designee will ensure that all sprinkler systems provide adequate coverage and appropriate rating for all portions of the building. 4.QA committee will ensure facility is in compliance with all sprinklers throughout the facility.	

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K 351	Continued From page 6 sprinkler system in accordance with NFPA 13 increases the risk of injury and death due to fire. The deficiency affected four (4) of numerous sprinklers in the facility. The automatic sprinkler system serves the entire facility.	K 351		
K 353 SS=F	Sprinkler System - Maintenance and Testing CFR(s): NFPA 101 Sprinkler System - Maintenance and Testing Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked _____ b) Who provided system test _____ c) Water system supply source _____ Provide in REMARKS information on coverage for any non-required or partial automatic sprinkler system. 9.7.5, 9.7.7, 9.7.8, and NFPA 25 This REQUIREMENT is not met as evidenced by: Automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. The property owner or designated representative shall correct or repair deficiencies or impairments that are found during the inspection, test, and maintenance required by NFPA 25, Standard for the Inspection, Testing and Maintenance of	K 353	1. A) Two (2) sprinklers in the Kitchen had excessive dust on the sprinklers that may delay the activation of the automatic fire sprinkler system. Both Sprinklers have been cleaned and are free from dust. B) The ceiling in the Transfer Switch Room had a 3" x 3" opening in the	4/21/18

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K 353	Continued From page 7 Water-based Fire Protection Systems. 19.7.6, 4.6.12, NFPA 25, 8.3, 8.3.1, 13.2.7.1, 13.3.2.1.1 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25. Observation and record review determined: 1) Two (2) sprinklers in the Kitchen had excessive dust on the sprinklers that may delay the activation of the automatic fire sprinkler system. 2) The ceiling in the Transfer Switch Room had a 3" x 3" opening in the gypsum board that may delay the activation of the automatic fire sprinkler system. 3) Monthly testing of the electric motor-driven fire pump was not documented. Fire pump testing shall be conducted as follows: Diesel engine-driven fire pumps shall be operated weekly. Electric motor-driven fire pumps shall be operated monthly. A test of fire pump assemblies shall be conducted without flowing water. The test shall be conducted by starting the pump automatically. The electric pump shall run a minimum of 10 minutes. The diesel pump shall run a minimum of 30 minutes. A valve installed to open as a safety feature shall be permitted to discharge water. An automatic timer shall be permitted to be substituted for the starting procedure. Qualified operating personnel shall be in attendance	K 353	gypsum board that may delay the activation of the automatic fire sprinkler system. The ceiling has been repaired. C) Monthly testing of the electric motor-driven fire pump was not documented.The pertinent visual observations or adjustments specified in the following checklists shall be conducted while the pump is running: (1) Pump system procedure as follows: (a) Record the system suction and discharge pressure gauge readings. (b) Check the pump packing glands for slight discharge. (c) Adjust gland nuts if necessary. (d) Check for unusual noise or vibration. (e)Check packing boxes, bearings, or pump casing for overheating. (f) Record the pump starting pressure. (2) Electrical system procedure as follows: (a) Observe the time for motor to accelerate to full speed. (b) Record the time controller is on first step (for reduced voltage or reduced current starting). (c) Record the time pump runs after starting (for automatic stop controllers). (3) Diesel engine system procedure as follows: (a) Observe the time for engine to crank. (b) Observe the time for engine to reach running speed. (c) Observe the engine oil pressure gauge, speed indicator, water, and oil temperature indicators periodically while engine is running. (d) Record any abnormalities.	

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K 353	Continued From page 8 whenever the pump is in operation. The pertinent visual observations or adjustments specified in the following checklists shall be conducted while the pump is running: (1) Pump system procedure as follows: (a) Record the system suction and discharge pressure gauge readings. (b) Check the pump packing glands for slight discharge. (c) Adjust gland nuts if necessary. (d) Check for unusual noise or vibration. (e)Check packing boxes, bearings, or pump casing for overheating. (f) Record the pump starting pressure. (2) Electrical system procedure as follows: (a) Observe the time for motor to accelerate to full speed. (b) Record the time controller is on first step (for reduced voltage or reduced current starting). (c) Record the time pump runs after starting (for automatic stop controllers). (3) Diesel engine system procedure as follows: (a) Observe the time for engine to crank. (b) Observe the time for engine to reach running speed. (c) Observe the engine oil pressure gauge, speed indicator, water, and oil temperature indicators periodically while engine is running. (d) Record any abnormalities. (e) Check the heat exchanger for cooling waterflow. (4) Steam system procedure as follows: (a) Record the steam pressure gauge reading. (b) Observe the time for turbine to reach running speed. Failure to inspect, test and maintain the automatic sprinkler system in accordance with	K 353	(e) Check the heat exchanger for cooling water flow. (4) Steam system procedure as follows: (a) Record the steam pressure gauge reading. (b) Observe the time for turbine to reach running speed. Facility has set up a system so the documentation shows proper testing of the electric motor-driven fire pump. 2.This deficiency has potential to affected the complete automatic sprinkler system, which serves the entire facility. 3. Maintenance or designee will ensure compliance of Sprinkler System - Maintenance and Testing and Automatic sprinkler and standpipe systems are inspected, tested, and maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintaining of Water-based Fire Protection Systems. Records of system design, maintenance, inspection and testing are maintained in a secure location and readily available. a) Date sprinkler system last checked b) Who provided system test c) Water system supply source 4. QA committee will monitor monthly to ensure compliance is being met.	

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K 353	Continued From page 9 NFPA 25 increases the risk of death or injury due to fire. The deficiency affected the complete automatic sprinkler system, which serves the entire facility.	K 353		
K 511 SS=D	Utilities - Gas and Electric CFR(s): NFPA 101 Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2 This REQUIREMENT is not met as evidenced by: Ground-fault circuit-interruption for personnel shall be provided as required. The ground-fault circuit-interrupter shall be installed in a readily accessible location. All 125-volt, single-phase, 15- and 20-ampere receptacles located in areas other than kitchens where receptacles are installed within 6 ft. of the outside edge of the sink shall have ground-fault circuit-interrupter protection for personnel. 19.5.1.1, 9.1.2, NFPA 70, 210.8, 210.8(A)(7) The facility failed to provide electrical wiring and equipment in accordance with NFPA 70, National Electrical Code. Observation determined:	K 511	1. A) Two (2) electrical receptacles in the Nurses Station within 6 ft. of a sink were not ground-fault circuit-interrupter protected. The 2 electrical receptacles have been replaced with a ground fault circuit. B) One (1) electrical receptacle in the Beauty Shop within 6 ft. of a sink was not ground-fault circuit-interrupter protected. The one electrical receptacle has been replaced with a ground fault circuit. 2. This deficiency has the potential to affect three (3) of numerous receptacles in the facility. 3. Maintenance or designee will ensure	4/21/18

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K 511	Continued From page 10 1) Two (2) electrical receptacles in the Nurses Station within 6 ft. of a sink were not ground-fault circuit-interrupter protected. 2) One (1) electrical receptacle in the Beauty Shop within 6 ft. of a sink was not ground-fault circuit-interrupter protected. Failure to provide electrical wiring and equipment in accordance with NFPA 70 increases the risk of injury or death due to fire. The deficiency affected three (3) of numerous receptacles in the facility.	K 511	ground-fault circuit-interrupter shall be installed in a readily accessible location. All 125-volt, single-phase, 15- and 20-ampere receptacles located in areas other than kitchens where receptacles are installed within 6 ft. of the outside edge of the sink shall have ground-fault circuit-interrupter protection for personnel. 4. QA committee will monitor compliance of ground fault circuit interrupter at monthly meetings.	
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 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	K 918		4/21/18

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SOURIS VALLEY CARE CENTER	**300 MAIN ST S** **VELVA, ND 58790**

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K 918	Continued From page 11 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, readily identifiable, and separate from normal power circuits. 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. NFPA 99 6.4.4.1.1.4, NFPA 110 8.3, 8.4.1 The facility failed to ensure the emergency generator was in compliance with NFPA 99 and NFPA 110. 1) Record review determined no documentation was available to indicate the generator was tested during the month of March 2017. (2) Review of generator test records indicated the monthly load tests of the generator were not performed as required. A generator load test was	K 918	1.(A) Record review determined no documentation was available to indicate the generator was tested during the month of March 2017. (B) Review of generator test records indicated the monthly load tests of the generator were not performed as required. A generator load test was conducted on 10/16/2017 and the previous test was conducted on 08/29/2017, exceeding the required 40 day testing requirement. 2. This deficiency has the potential of affecting one (1) of one (1) emergency generator which provides all emergency power to the facility. 3. Maintenance or designee will ensure that emergency generator is in compliance with maintenance and testing to ensure that the essential electrical systems shall be tested in accordance	

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 _____	**03/07/2018**

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

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K 918	Continued From page 12 conducted on 10/16/2017 and the previous test was conducted on 08/29/2017, exceeding the required 40 day testing requirement. Failure to inspect and maintain the emergency generator in accordance with NFPA 99 and NFPA 110 increases the risk of death or injury due to fire. The deficiency affected one (1) of one (1) emergency generator which provides all emergency power to the facility.	K 918	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. NFPA 99 4. QA committee will monitor and ensure that the generator follows weekly and monthly testing during monthly QA meetings.	