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

PRINTED: 09/30/2010
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355033	A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	09/29/2010

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ST CATHERINES LIVING CENTER	1307 N 7TH ST WAHPETON, ND 58075

(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 original building was one-story of Type II (111) construction. Additions attached to the structure were of Type V (000) construction with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems. A Fire Safety Evaluation System (FSES) was conducted as a result of the 9/29/10 Life Safety Code survey. The FSES was specifically used as an alternative safety method for Tag K 024 - Travel Distance Within Smoke Compartment. The facility passes the FSES. Note: CMS requires unsprinklered long term care facilities to install an approved, supervised automatic sprinkler system in accordance with the 1999 edition of NFPA 13, Standard for the Installation of Sprinkler Systems throughout the buildings by August 13, 2013.	K 000		
K 024 SS=B	NFPA 101 LIFE SAFETY CODE STANDARD The smoke compartments do not exceed 22,500 square feet and the travel distance to and from any point to reach a door in the required smoke barrier does not exceed 200 feet. 19.3.7.1	K 024		

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

CEO Administrator 10-4-10

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 024	Continued From page 1 This STANDARD is not met as evidenced by: The facility failed to ensure the travel distance to reach a door in the required smoke barrier did not exceed 200 feet. Observation determined the 500/600 Wing smoke compartment (1 of 5) exceeded the maximum 200 feet travel distance to reach the nearest smoke barrier.	K 024	A Fire Safety Evaluation System (FSES) was conducted as a result of the 9/29/10 Life Safety Code survey. The FSES was specifically used as an alternative safety method for Tag K 024 - Travel Distance Within Smoke Compartment. The facility passes the FSES upon correction of all other deficiencies.	
K 025 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD Smoke barriers are constructed to provide at least a one half hour fire resistance rating in accordance with 8.3. Smoke barriers may terminate at an atrium wall. Windows are protected by fire-rated glazing or by wired glass panels and steel frames. A minimum of two separate compartments are provided on each floor. Dampers are not required in duct penetrations of smoke barriers in fully ducted heating, ventilating, and air conditioning systems. 19.3.7.3, 19.3.7.5, 19.1.6.3, 19.1.6.4 This STANDARD is not met as evidenced by: The facility failed to ensure one (1) of four (4) smoke barriers was at least one-half hour fire resistant and smoke resistant. Observation determined penetrations consisting of two pipes and a cluster of electrical conduit in the smoke barrier between the 100 Wing and 200 Wing were not sealed with fire-rated product installed in accordance with the manufacturer's UL listing.	K 025	The smoke barrier penetration located between the 100 & 200 wing consisting of two pipes and a cluster of electrical conduits will be sealed with CP 620 Fire Foam to comply with the NFPA 101 Life Safety Code Standard.. Smoke Barriers will be monitored and maintained with the use of a Life Safety audit and will be monitored by Plant Operations. Completion date: 10/13/2010	
K 051 SS=F	NFPA 101 LIFE SAFETY CODE STANDARD	K 051		

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K 051	Continued From page 2 A fire alarm system with approved components, devices or equipment is installed according to NFPA 72, National Fire Alarm Code, to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system is by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations in patient sleeping areas may be omitted provided that manual pull stations are within 200 feet of nurse's stations. Pull stations are located in the path of egress. Electronic or written records of tests are available. A reliable second source of power is provided. Fire alarm systems are maintained in accordance with NFPA 72 and records of maintenance are kept readily available. There is remote annunciation of the fire alarm system to an approved central station. 19.3.4, 9.6 This STANDARD is not met as evidenced by: The facility failed to ensure the fire alarm system is in compliance with NFPA 72. The building is equipped with two (2) fire alarm panels and one (1) annunciation panel. The north fire alarm panel and the annunciation panel serve the 500, 600, and 700 Wings. The south fire alarm panel serves the 100, 200, 300 and 400 Wings. Observation determined:	K 051		

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K 051	Continued From page 3 1) The annunciation panel was not equipped with an audible and visible signal that would indicate system trouble. 2) The south fire alarm panel was not connected to the annunciation panel located at the North Nurse Station. The south fire alarm panel system troubles and fire alarm zones were not being monitored at the North Nurses Station. 3) The annunciation panel at the North Nurse Station does not monitor the fire alarm system supervisory signal.	K 051	A Mircom Addressable Fire Alarm Control Panel will be replacing our existing FCI panel. This upgrade will have the capability to communicate with the North Building & South Building along with being able to provide an annunciation panel complete with a visual and audible trouble & alarm monitoring system at the North & South Nurse Stations. North and South Fire Alarm Systems will be monitored and maintained with the use of a Life Safety audit and will be monitored by Plant Operations. Completion date: [redacted] 11/13/2010 to be Jerry Trupke 10-7-10	