

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 5842	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - BONNEY FAMILY HOME, I B. WING _____	(X3) DATE SURVEY COMPLETED 10/23/2008
NAME OF PROVIDER OR SUPPLIER BONNEY FAMILY HOME, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 2021 BARBARA AVENUE GALLUP, NM 87301		
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A 01	OPENING REMARKS Surveyor: 21700 The following deficiencies were cited as a result of an annual life safety code survey conducted on 10/23/08 for the Life Safety Code portion of the New Mexico Regulations Governing Requirements for Adult Residential Care Facilities 7.8.2 NMAC.	A 01		
A59	7 NMAC 8.2.59 Fire Clearance & Inspections 7.8.2.59 FIRE CLEARANCE AND INSPECTIONS: A. Written documentation from the State Fire Marshall's office or Fire Prevention Authority having jurisdiction indicating a facility's compliance with applicable fire prevention codes shall be submitted to the Licensing Authority prior to issuance of a initial license. B. Each facility shall request from the local fire prevention authorities an annual fire inspection. If the policy of the local fire department does not provide for annual inspection of the facility, the facility will document the date the request was made and to whom and then contact licensing authorities. If the local fire prevention authorities do make annual inspections, a copy of the latest inspection must be kept on file in the facility. [7-1-64, 9-24-76, 7-11-86, 1-11-90, 4-7-97; 7.8.2.59 NMAC - Rn, 7 NMAC 8.2.59, 8-31-00] This REQUIREMENT is not met as evidenced by: Surveyor: 21700 NFPA 72, 1999 Edition: Section 7-1.1.1 Inspection, testing, and maintenance programs shall satisfy the requirements of this code, shall conform to the equipment manufacturer's	A59	<i>Scanned 11-26-08 YU</i> <i>Jesus Morillas of Gallup Fire Department inspected the facility on 10-10-08 and returned on 10-27-08 for final approval. You may contact him at Gallup Fire Department (505) 722-7195</i> <i>This was completed</i>	<i>10-27-08</i>

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

STATE FORM

TITLE

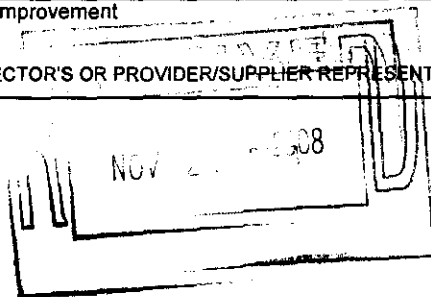
(X6) DATE

John Bonney Manager *11/2/08*

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If continuation sheet 1 of 8



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A59	Continued From page 1 recommendations, and shall verify correct operation of the fire alarm system. Section 7-1.1.2 System defects and malfunctions shall be corrected. If a defect or malfunction is not corrected at the conclusion of system inspection, testing, or maintenance, the system owner or the owner's designated representative shall be informed of the impairment in writing within 24 hours. Hoods, grease removal devices, fans, ducts, and other appurtenances shall be cleaned to bare metal at frequent intervals prior to surfaces becoming heavily contaminated with grease or oily sludge. After the exhaust system is cleaned to bare metal, it shall not be coated with powder or other substance. The entire exhaust system shall be inspected by a properly trained, qualified, and certified company or person(s) acceptable to the authority having jurisdiction in accordance with accordance with Table 8-3.1. Based on observation, record review and staff interview, the facility's practice failed to ensure that the range hood suppression system and its components are inspected and maintained in accordance with NFPA 96. This deficient practice has the potential to affect all residents, staff and occupants of the facility. The licensed capacity of the facility is 16, the census during survey was 15. The findings are: 1. On 10/23/08 at 1:00 pm, review of the local fire authority inspection revealed the following comment, "Commercial cooking range shall be inspected to ensure proper installation. Note; Suppression system may be required; vent duct	A59			

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A59	Continued From page 2 shall be inspected." a. At this time, the Acting Administrator stated they would schedule an inspection of the range hood. b. No evidence of a range hood inspection was available for review. c. No evidence of an inspection or cleaning of the range hood duct was available for review. d. The Acting Administrator acknowledged this finding at the exit conference on 10/23/08.	A59		
A61	7 NMAC 8.2.61 Automatic Fire Protection (sprinkler) System 7.8.2.61 AUTOMATIC FIRE PROTECTION (SPRINKLER) SYSTEM: Where an automatic fire protection (sprinkler) system is installed for total or partial coverage, the system shall be in accordance with NFPA 13 or NFPA 13D as applicable. [4-7-97; 7.8.2.61 NMAC - Rn, 7 NMAC 8.2.61, 8-31-00] This REQUIREMENT is not met as evidenced by: Surveyor: 21700 AUTOMATIC FIRE PROTECTION (SPRINKLER SYSTEM): Maintenance of system: Reference NFPA 13, Section 1-5.1 Maintenance: A sprinkler system installed under this standard shall be properly maintained for efficient service. The owner is responsible for the condition of the sprinkler system and shall use due diligence in keeping the system in good operating condition. Reference NFPA 13	A61	<i>The sprinkler system was inspected on 10-9-08. We did not have the proof of it at time of inspection by Division of Health Improvement. A copy of inspection is enclosed and we will monitor this every quarter. 10-9-08</i>	

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A61	Continued From page 3 Section 4-5.5.2.1 Continuous or non-continuous obstructions less than eighteen (18) below the sprinkler deflector that prevents the pattern from fully developing shall comply with this section. Section 4-5.5.3 Continuous or noncontinuous obstructions that interrupt the water discharge in a horizontal plane more than eighteen (18) inches below the sprinkler deflector in a manner to limit the distribution from reaching the protected hazard shall comply with this section. Section 4-5.6 requires that the clearance between the deflector and the top of storage shall be eighteen (18) inches or greater. Reference NFPA 25, 1-4.2 The responsibility for properly maintaining a water-based fire protection system shall be that of the owner(s) of the property. By means of periodic inspections, tests, and maintenance, the equipment shall be shown to be in good operating condition, or any defects or impairments shall be revealed. Inspection, testing, and maintenance shall be implemented in accordance with procedures meeting or exceeding those established in this document and in accordance with the manufacturer's instructions. These tasks shall be performed by personnel who have developed competence through training and experience. Based on observation and staff interview, the facility's practice failed to ensure that the sprinkler system is inspected and maintained in good operating condition, affecting all residents and staff throughout the facility. The licensed capacity of the facility is 16, the census during the survey was 15. The findings are:	A61		

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A61	Continued From page 4 On October 23, 2008, during a tour of the facility with the Acting Administrator, the Life Safety Code Surveyor observed the following: 1. On 10/23/08 at 1:00 pm, during record review with the Acting Administrator, the facility failed to provide evidence of quarterly inspections of the sprinkler system for the past 12 months. a. The last fire sprinkler system inspection report available for review was dated 03/19/08. b. The Acting Administrator stated that the facility is having the facility's sprinkler system inspected annually and not quarterly. She continued by saying, "We will start having quarterly inspections of the fire sprinkler system." c. There was no other evidence available for review. d. The Acting Administrator acknowledged this finding at the exit conference on 10/23/08. 2. At 1:30 pm, the surveyor observed string hanging from the sprinkler head within the dining room. a. This would not allow the sprinkler deflector to work as intended. b. The Acting Administrator acknowledged this finding at the exit conference on 10/23/08. 3. At 1:32 pm, the surveyor observed a sprinkler head within the kitchen with lint and grease build up. a. This would not allow the sprinkler deflector to work as intended. b. The Acting Administrator acknowledged this finding at the exit conference on 10/23/08. 4. At 1:42 pm, the surveyor observed two (2) sprinkler heads within the laundry with lint build up.	A61		

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A61	Continued From page 5 a. This would not allow the sprinkler deflector to work as intended. b. The Acting Administrator acknowledged this finding at the exit conference on 10/23/08.	A61		
A62	7 NMAC 8.2.62 Fire Extinguishers 7.8.2.62 FIRE EXTINGUISHERS: A. As approved by the State Fire Marshall or Fire Prevention Authority having jurisdiction must be located in the facility. Facilities must as a minimum have two (2) 2A10BC fire extinguishers, one (1) located in the kitchen or food preparation area, and one (1) centrally located in the facility. All fire extinguishers shall be inspected yearly and recharged as needed. All fire extinguishers must be tagged noting the date of inspection. B. Fire extinguishers, alarm systems, automatic detection equipment, and other fire fighting equipment must be properly maintained and inspected as recommended by the manufacturer, State Fire Marshall, or Fire Authority having jurisdiction. [7-1-64, 9-24-76, 7-11-86, 4-7-97; 7.8.2.62 NMAC - Rn, 7 NMAC 8.2.62, 8-31-00] This REQUIREMENT is not met as evidenced by: Surveyor: 21700 Reference Tag B. FIRE EXTINGUISHERS: Reference NFPA 10, Standard for Portable Fire Extinguishers, 1998 Edition: 4-3 Inspection. 4-3.1* Frequency. Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected at more frequent intervals when circumstances require.	A62	<i>The fire extinguishers was checked on 11.4.08 we will continue this procedure monthly and record it. The facility will follow this guideline monthly</i>	<i>11.4.08</i>

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A62	Continued From page 6 4-3.2* Procedures. Periodic inspection of fire extinguishers shall include a check of at least the following items: (a) Location in designated place (b) No obstruction to access or visibility (c) Operating instructions on nameplate legible and facing outward (d) * Safety seals and tamper indicators not broken or missing (e) Fullness determined by weighing or " hefting " (f) Examination for obvious physical damage, corrosion, leakage, or clogged nozzle (g) Pressure gauge reading or indicator in the operable range or position (h) Condition of tires, wheels, carriage, hose, and nozzle checked (for wheeled units) (i) HMIS label in place Based on observation and staff interview, the facility's practice failed to ensure that all portable fire extinguishers are inspected monthly, documented and maintained in accordance with NFPA 10, (Standard for Portable Fire Extinguishers), affecting all residents, staff and occupants of the facility. The licensed capacity of the facility is 16, the census during the survey was 15. The findings are: 1. On 10/23/08 during a tour of the facility with the Acting Administrator, the surveyor observed that the portable fire extinguishers located throughout the facility were not inspected at least every month (not to exceed 30-days) by staff. a. The fire extinguishers located throughout the facility were serviced by a professional company every twelve (12) months. These fire	A62		

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A62	Continued From page 7 extinguishers were tagged March 2008. b. Five (5) of five (5) fire extinguishers located throughout the facility had no evidence of a monthly inspection. c. The Acting Administrator acknowledged this finding and agreed to correct the problem.	A62			