STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355100	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**11/03/2016**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOOD SAMARITAN SOCIETY - DEVILS LAKE	**302 7TH AVE NE** **DEVILS LAKE, ND 58301**

(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 Good Samaritan Society-Devils Lake was located in a one-story building of Type V (000) construction with a partial basement. The facility was equipped with two (2) dry automatic fire sprinkler systems designed to meet the requirements of NFPA 13, Standard for the Installation of Sprinkler Systems.	K 000		
K 211 SS=F	NFPA 101 Means of Egress - General 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 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 4 1/2 in. (114 mm) on each side shall be permitted at 38 in. (965 mm) and below. 7.1.10.1, 7.3.2.2	K 211	1. The facility has contracted an outside contractor Johnson Controls who will eliminate radiant heaters in the basement which extend 10 inches into corridor. The removal of these radiant heaters will correct the affected access of the two of two basement exit corridors. 2. The Environmental Service Director will review all areas of the facility to ensure no other areas are affected by deficient practice.	11/25/16

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

Electronically Signed | 11/15/2016

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K 211	Continued From page 1 The facility failed to keep corridors free of obstructions. Observation determined radiant heaters in the basement exit corridors extended approximately ten (10) inches from the corridor wall and protruded into the exit corridor. This deficiency affected exit access in two (2) of two (2) basement exit corridors of the facility. Failure to ensure exit access is readily available at all times increases the risk of death or injury due to fire.	K 211	3. The Environmental Service Director will monitor facility corridors and educate staff to ensure they remain free of obstructions. 4. An audit will be completed 3 times a month for the first month, 2 times a month for the second month and then quarterly. All audits will be submitted to the quality assurance committee. 5. Review of facility and removal of radiant heaters will be completed by 11/25/2016	
K 341 SS=F	NFPA 101 Fire Alarm System - Installation Fire Alarm System - Installation A fire alarm system is installed with systems and components approved for the purpose in accordance with NFPA 70, National Electric Code, and NFPA 72, National Fire Alarm Code to provide effective warning of fire in any part of the building. In areas not continuously occupied, detection is installed at each fire alarm control unit. In new occupancy, detection is also installed at notification appliance circuit power extenders, and supervising station transmitting equipment. Fire alarm system wiring or other transmission paths are monitored for integrity. 18.3.4.1, 19.3.4.1, 9.6, 9.6.1.8 This STANDARD is not met as evidenced by: Initial acceptance testing shall be performed on a newly installed fire alarm system and all of its components in accordance with 14.4.1.1.1.1	K 341	1. The facility has contacted outside contractor Convergent who is the installer of the fire alarm system. Convergent will	12/2/16

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K 341	Continued From page 2 through 14.4.1.1.1.2 of NFPA 72, National Fire Alarm Code. The authority having jurisdiction shall be notified prior to the initial acceptance test. Records review determined a fire alarm system was in the process of being installed by an outside contractor. Failure to install and complete the required final acceptance test of the fire alarm system and all of its components increases the risk of injury and death by fire. The fire alarm system serves the entire facility and affects all smoke compartments.	K 341	complete the required final acceptance test of the new fire alarm system. 2. This fire alarm system serves the entire facility. 3. Once the final acceptance test is completed by Convergent, the facilities fire alarm system will be in compliance. 4. The Environmental Service Director will submit the final acceptance test to the quality assurance committee. 5. Convergent will complete final acceptance test by 12/02/2016	
K 351 SS=D	NFPA 101 Sprinkler System - Installation Spinkler System - Installation 2012 EXISTING Nursing homes, and hospitals where required by 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)	K 351		12/18/16

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K 351	Continued From page 3 This STANDARD is not met as evidenced by: Health care facilities shall be protected throughout by an approved, supervised automatic fire sprinkler system. NFPA 13, Standard for Installation of Sprinkler Systems. 19.3.5.1, 9.3.5.2, 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). Observation determined elevator pits for two (2) of two (2) hydraulically operated elevators lacked sprinklers in the bottom of the elevator shaft. Failure to provide automatic fire sprinkler system coverage throughout the building increases the risk of injury or death. This deficiency affected two (2) of two (2) elevators in facility.	K 351	1. The facility has contacted outside contractor Allied Fire Protection who will install required sprinkler heads in the bottom of both elevator shafts. 2. The Environmental Service Director and Allied Fire Protection will conduct a facility assessment to ensure automatic sprinkler heads are in required locations as sprinkler system protects entire facility. 3.Once sprinklers are installed into elevator shafts this area will be compliant. 4. The Environmental Service Director will conduct an annual inspection of sprinkler heads to ensure continued proper placement and condition. The Environmental Service Director will submit an annual report of these findings to the quality assurance committee. 5. The installation of elevator sprinkler heads will be completed by 12/18/2016	
K 901 SS=F	NFPA 101 Fundamentals - Building System Categories Fundamentals - Building System Categories Building systems are designed to meet Category 1 through 4 requirements as detailed in NFPA 99. Categories are determined by a formal and documented risk assessment procedure performed by qualified personnel. Chapter 4 (NFPA 99) This STANDARD is not met as evidenced by: The facility failed to provide a documented risk assessment of building systems. NFPA 99, 4.2.	K 901	1. The facility will complete a documented facility systems risk	12/2/16

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K 901	Continued From page 4 Review of documentation and interview of staff determined the facility failed to conduct and document a risk assessment of building systems. Failure to conduct a risk assessment of building systems increases the risk of injury or death due to fire. This deficiency affected building systems throughout the entire facility.	K 901	assessment. 2. The whole facility has been identified as being affected by lacking a facility systems risk assessment completed and documented. 3. The Environmental Service Director will complete a facility systems risk assessment. The facility systems risk assessment will be a living document that can be continually updated as needed. 4. The facility will review our completed facility systems risk assessment on a quarterly basis in the safety committee. Any additions of changes to the facility systems risk assessment will be forwarded to the quality assurance committee. 5. The facility risk assessment will be completed on December 2nd 2016.	
K 912 SS=D	NFPA 101 Electrical Systems - Receptacles Electrical Systems - Receptacles Power receptacles have at least one, separate, highly dependable grounding pole capable of maintaining low-contact resistance with its mating plug. In pediatric locations, receptacles in patient rooms, bathrooms, play rooms, and activity rooms, other than nurseries, are listed tamper-resistant or employ a listed cover. If used in patient care room, ground-fault circuit interrupters (GFCI) are listed. 6.3.2.2.6.2 (F), 6.3.2.4.2 (NFPA 99) This STANDARD is not met as evidenced by: Whenever or wherever any device, equipment,system, condition, arrangement, level of protection, or any other feature is required for compliance with the provisions of this Code, such device, equipment protection system, condition,	K 912	1. The Environmental Service Director will ensure that all facility ground fault circuit interrupters are maintained in operable condition. The two failed GFCI protected receptacles have been replaced	12/9/16

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K 912	Continued From page 5 arrangement, level of protection, or other feature shall thereafter be maintained, unless the Code exempts such maintenance. 4.5.8. When electrical hazards are identified, measures to abate such conditions shall be taken. Ground fault circuit interrupters (GFCIs) were not maintained in operable condition. Observation determined the GFCI located in the Medication Room and the Nutrition Center 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 two (2) of numerous GFCI protected receptacles in the facility.	K 912	by an outside contractor Lake Region Electric on 11/04/2016. 2. All of the facilities GFCI protected receptacles have the potential to be affected by this deficient practice. 3. All of the facilities GFCI protected outlets will be tested by the Environmental Service Director to ensure operable condition. 4. The Environmental Service Director will complete testing/audit of facilities GFCI protected outlets. 3 audits for one month, 2 audits for the second month and then audit quarterly. The results of the audits will be brought to the quality assurance committee. 5. The two failed GFCI outlets have been replaced and all GFCI protected outlets will be tested by December 9th 2016.	