STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355079	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**01/15/2019**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VILLA MARIA	**3102 S UNIVERSITY DR** **FARGO, ND 58103**

(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 two-story building with a partial basement. The original building was of Type I (332) construction and the 1993 and 1994 additions are Type II (111) construction. A two-story addition of Type II (000) construction on the west side of the building and a one-story addition of Type II (000) construction on the east side of the building were constructed in 2008. A new two-hour fire rated separation/smoke barrier between the center of the original building and the south portion of the original building was added to maintain a portion of the original Type I (322) construction. Due to the lack of two-hour fire rated separation between the 2008 addition to the west and the remainder of the original building, the center and north portion of the original building was classified as Type II (000) construction. The entire building was equipped with a wet automatic sprinkler system designed to meet the requirements of the 1999 edition of NFPA 13, Standard for the Installation of Sprinkler Systems. The basement areas were separated from the main floor by two-hour fire resistive construction and were being used by staff only. The integrity of the basement's floor/ceiling assembly was	K 000		

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

Electronically Signed | 01/24/2019

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VILLA MARIA	**3102 S UNIVERSITY DR** **FARGO, ND 58103**

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K 000	Continued From page 1 included in this survey, but the basement area was not.	K 000		
K 347 SS=E	Smoke Detection CFR(s): NFPA 101 Smoke Detection 2012 EXISTING Smoke detection systems are provided in spaces open to corridors as required by 19.3.6.1. 19.3.4.5.2 This REQUIREMENT is not met as evidenced by: 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, unless if it is an approved existing installation, which shall be permitted to be continued in use. 9.6.1.3. In the absence of specific performance-based design criteria, smooth ceiling smoke detector spacing shall be a nominal 30 ft (9.1 m). NFPA 72: 17.7.3.2.3.1 The facility failed to install the smoke detection system in accordance with NFPA 72. Observation determined smoke detectors in the corridors in the N.E. Hall, N.E. Pod, North Wing Day Room, S.E. Hall, and South Wing Day Room were more than 30 ft apart. Failure to install smoke detectors in accordance with NFPA 72 increases the risk of injury or death due to fire. This deficiency affected numerous smoke	K 347	1. Corrective action: It is the practice of the facility to have smoke detectors installed in accordance with NFPA 72 to reduce the risk of injury or death due to fire. Installation of additional smoke detectors, and repositioning other smoke detectors took place in the corridor in the N.E. Hall, N.E. Pod, and North Wing Day Room, S.E. Hall, and South Wing Day room to be no more than 30 feet apart. The installation of additional smoke detectors and repositioning of other smoke detectors was completed on January 16, 2019, 2019 by Systems Technology (Fire Alarm Specialist). 2. Identify other areas: All hallways, Day Rooms, corridors, have the potential to be affected by this deficient practice. 3. Measures put in place: Systems Technology did a full walk thru inspection of the entire building for proper placement to ensure compliance. Thru	1/29/19

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	355079	A. BUILDING **01 - MAIN BUILDING 01** B. WING _____	**01/15/2019**

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VILLA MARIA	**3102 S UNIVERSITY DR** **FARGO, ND 58103**

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K 347	Continued From page 2 detectors in the facility. The smoke detection system serves the entire facility.	K 347	the inspection Systems Technology installed 2 additional smoke detectors and moved 5 others in the hallways and Friendship Pod to be in compliance with NFPA 72. 4. Monitoring: An annual audit will be conducted by the Maintenance Director/designee to verify that the smoke detectors have not been changed or moved. The audit will be reviewed by the Quality Assurance Committee. 5. The facility will be in substantial compliance by January 29, 2019.	
K 912 SS=F	Electrical Systems - Receptacles CFR(s): NFPA 101 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), 6.3.2.2.4.2 (NFPA 99) 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	K 912	1. Corrective action: It is the practice of the facility to provide electrical wiring and equipment in accordance with NFPA 70, National Electrical Code. All electrical receptacles within 6 ft. of a	1/29/19

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K 912	Continued From page 3 installed within 6 ft. of the outside edge of the sink shall have ground-fault circuit-interrupter protection for personnel. 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 electrical receptacles throughout the facility were installed within 6 ft. of a sink and were 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 numerous receptacles throughout the facility.	K 912	sink have been inspected to ensure they are ground-fault circuit-interrupter protected. 2. Identify other areas: All electrical receptacles throughout the facility that are within 6 ft. of a sink have the potential to be affected by this deficient practice. 3. Measures put in place: A full audit inspection was completed of the entire building and identified any outlets that did not meet the NFPA70, National Electrical Code. This inspection resulted in 51 receptacles throughout the facility that were within 6 ft. of a sink and have been replaced with a ground-fault circuit-interrupter. This was completed by Fusion Electric on January 17, 2019. 4. Monitoring: An annual audit will be conducted by the Maintenance Director/designee to verify that the electrical receptacles within 6 ft. of a water source are ground-fault circuit-interrupter protected. The audit will be reviewed by the Quality Assurance Committee. 5. The facility will be in substantial compliance by January 29, 2019.	