STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355036	A. BUILDING **01** B. WING _____	**01/04/2022**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARIAN MANOR HEALTHCARE CENTER	**604 ASH AVE E** **GLEN ULLIN, ND 58631**

(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
E 000	Initial Comments A certification survey conducted on January 4, 2022 found Marion Manor Healthcare Center in compliance with the requirements of 483.73 Long Term Care Emergency Preparedness.	E 000		
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 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 II (000) construction. The building was protected with a wet automatic sprinkler system designed to meet the requirements of NFPA 13, Standard for Installation of Sprinkler Systems and a corridor smoke detection system. Two-hour fire rated occupancy separation walls were constructed between the facility and the attached apartments to the east and an outpatient clinical building to the west. Note: A Fire Safety Evaluation System (FSES) was conducted as a result of the 01/04/2022 Life Safety Code survey. The FSES was specifically used as an alternative safety method for K211 (Means of egress obstructions). The facility passes the FSES upon correction of all other deficiencies.	K 000		
K 211 SS=D	Means of Egress - General CFR(s): NFPA 101	K 211		1/14/22

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

Electronically Signed | 01/27/2022

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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K 211	Continued From page 1 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: 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 The facility failed to keep corridors free of obstructions. Observation determined the water fountain in the exit corridor near the Reception Area extended approximately ten (10) inches from the corridor wall and protruded into the exit corridor. This deficiency affected exit access to one (1) of seven (7) exits from 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	A Fire Safety Evaluation System (FSES) was conducted as a result of the 01/04/2022 Life Safety Code survey. The FSES was specifically used as an alternative safety method for K211 (Means of egress obstructions). The facility passes the FSES upon correction of all other deficiencies.	
K 353 SS=D	Sprinkler System - Maintenance and Testing CFR(s): NFPA 101	K 353		1/14/22

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K 353	Continued From page 2 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 Water-based Fire Protection Systems. 19.7.6, 4.6.12, NFPA 25 4.1.4.1 The facility failed to ensure the automatic sprinkler system was continuously maintained in a reliable operating condition as required by NFPA 25.	K 353	K353 □ The flow tests of the automatic sprinkler system shall be conducted quarterly to ensure that the system is continuously maintained in a reliable operating condition. The quarterly flow tests for sprinkler system will be recorded on a separate sprinkler testing tag from the annual sprinkler inspection and backflow tests. The inspection tags are attached to the sprinkler system and located in the 2 East boiler room. All other fire sprinkler inspection tags from prior years will be removed from the system and stored in the maintenance shop. New process implemented for February flow testing and will be	

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K 353	Continued From page 3 Record review and observation determined quarterly flow tests of the automatic sprinkler system were not completed as required. Records did not indicate a flow test was conducted during the second quarter of 2021. Failure to inspect, test and maintain the automatic sprinkler system in accordance with 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	completed by January 21st. The facility has only one automatic sprinkler system requiring quarterly testing so there is no other procedure that is affected by this practice. The administrator will add the quarterly automatic sprinkler flow test to current calendar reminders used for other quarterly, bi-annual and annual inspections and tests. Retraining and review of related documentation has occurred with maintenance staff responsible for the inspections. The quarterly tests will be performed and documented by maintenance personnel, monitored by the administrator, and reported to the quality assurance committee on an annual basis.	