STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	355078	A. BUILDING **01** B. WING _____	**11/02/2021**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EVENTIDE JAMESTOWN	**1300 2ND PL NE** **JAMESTOWN, ND 58401**

(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 recertification survey conducted on November 2, 2021 found Eventide Jamestown 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, Standard for 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 one-story building of Type V (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. Note: A Fire Safety Evaluation System (FSES) was conducted as a result of the 11/02/2021 Life Safety Code survey. The FSES was specifically used as an alternative safety method for K 241 (Number of Exits) and K 271 (Discharge From Exits). The facility passes the FSES upon correction of all other deficiencies.	K 000		
K 241 SS=D	Number of Exits - Story and Compartment CFR(s): NFPA 101 Number of Exits - Story and Compartment Not less than two exits, remote from each other, and accessible from every part of every story are	K 241		11/30/21

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

Electronically Signed | 11/13/2021

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K 241	Continued From page 1 provided for each story. Each smoke compartment shall likewise be provided with two distinct egress paths to exits that do not require the entry into the same adjacent smoke compartment. 18.2.4.1-18.2.4.4, 19.2.4.1-19.2.4.4 This REQUIREMENT is not met as evidenced by: Not more than 50 percent of the required number of exits, and not more than 50 percent of the required egress capacity, shall be permitted to discharge through areas on the level of exit discharge. The facility failed to arrange at least 50 percent of exits to discharge directly to the exterior of the building. Observation determined two (2) of two (2) stair enclosures from the partial basement discharged into the first-floor corridor of the building rather than into an exit passageway or to the exterior of the building. Failure to provide exits in accordance with NFPA 101 increases the risk of injury or death due to fire. This deficiency affected two (2) of two (2) designated exits from the basement.	K 241	A Fire Safety Evaluation System (FSES) was conducted as a result of the 11/02/2021 Life Safety Code survey. The FSES was specifically used as an alternative safety method for K 241, (Number of Exits). The facility passes the FSES upon correction of all other deficiencies.	
K 271 SS=D	Discharge from Exits CFR(s): NFPA 101 Discharge from Exits Exit discharge is arranged in accordance with 7.7, provides a level walking surface meeting the provisions of 7.1.7 with respect to changes in elevation and shall be maintained free of	K 271		11/30/21

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K 271	Continued From page 2 obstructions. Additionally, the exit discharge shall be a hard packed all-weather travel surface. 18.2.7, 19.2.7 This REQUIREMENT is not met as evidenced by: Exits must terminate directly at a public way or at an exterior exit discharge. Yards, courts, open spaces, or other portions of the exit discharge must be of required width and size to provide all occupants with safe access to a public way. To ensure adequate exit capability, CMS requires asphalt or concrete surfaces from exterior exits to public ways. CMS Survey and Certification Letter 05-38. Observation determined the two (2) exterior exits from the Chapel traverse the lawn to get to a public way. Failure to provide asphalt or concrete surfaces from exterior exits increases the risk of injury or death due to fire. The deficiency affected two (2) of twelve (12) exterior exits from the building.	K 271	A Fire Safety Evaluation System (FSES) was conducted as a result of the 11/02/2021 Life Safety Code survey. The FSES was specifically used as an alternative safety method for K 271 (exterior exits to public ways). The facility passes the FSES upon correction of all other deficiencies.	
K 324 SS=D	Cooking Facilities CFR(s): NFPA 101 Cooking Facilities Cooking equipment is protected in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations, unless: * residential cooking equipment (i.e., small appliances such as microwaves, hot plates, toasters) are used for food warming or limited cooking in accordance with 18.3.2.5.2, 19.3.2.5.2	K 324		11/30/21

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K 324	Continued From page 3 * cooking facilities open to the corridor in smoke compartments with 30 or fewer patients comply with the conditions under 18.3.2.5.3, 19.3.2.5.3, or * cooking facilities in smoke compartments with 30 or fewer patients comply with conditions under 18.3.2.5.4, 19.3.2.5.4. Cooking facilities protected according to NFPA 96 per 9.2.3 are not required to be enclosed as hazardous areas, but shall not be open to the corridor. 18.3.2.5.1 through 18.3.2.5.4, 19.3.2.5.1 through 19.3.2.5.5, 9.2.3, TIA 12-2 This REQUIREMENT is not met as evidenced by: The facility failed to install cooking equipment in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. A readily accessible means for manual activation shall be located between 1067 mm and 1219 mm (42 in. and 48 in.) above the floor, be accessible in the event of a fire, be located in a path of egress, and clearly identify the hazard protected. 19.3.2.5.1, 9.2.3, NFPA 96 10.5.1. Observation determined the manual actuation device for the fire-extinguishing system serving the Kitchen exhaust hood was mounted at a height of more than forty-eight (48) inches above the floor. The manual pull was 60 inches above the floor.	K 324	1. Nardini, Fire protection System contractor was contacted and is ordering materials for the lowering of the Kitchen hood wet extinguisher pull station to 42”-48” off of the floor. 2. No other kitchen hood fire protection systems are located in the building that may require this correction. 3. The Maintenance Director (Designee) will be responsible to monitor all kitchen fire system modifications to insure compliance with NFPA Code requirements. 4. Maintenance Director (Designee) will provide a listing of all Kitchen fire system modifications as they occur to the QA committee for review and compliance check.	

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K 324	Continued From page 4 Failure to inspect, maintain, and install the wet chemical extinguishing system in accordance with NFPA 96 increases the risk of injury or death due to fire. This deficiency affected one (1) of one (1) wet chemical extinguishing system in the facility.	K 324		
K 511 SS=D	Utilities - Gas and Electric CFR(s): NFPA 101 Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. Existing installations can continue in service provided no hazard to life. 18.5.1.1, 19.5.1.1, 9.1.1, 9.1.2 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 bathrooms, kitchens, rooftops, outdoors, indoor wet locations, locker rooms with associated showering facilities, garages and where receptacles are installed within 6 ft. of the outside edge of the sink shall have ground-fault circuit-interrupter protection for personnel. 19.5.1.1, 9.1.2, NFPA 70, 210.8, 210.8(B) The facility failed to ensure electrical wiring and	K 511	1. Electrical contractor was hired to replace all 115-125 volt 15-20 amp kitchen outlets with approved GFCI outlets. 2. Maintenance Director (Designee) to review other kitchen / wet hazardous locations for 125 volt outlets which require GFCI protection. 3. Maintenance Director (Designee) will be responsible to monitor new construction and remodeling contracts to assess if GFCI outlets are required 4. Facility QA committee will review any new or remodel projects for NFPA code	11/30/21

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K 511	Continued From page 5 electrical equipment met the requirements of NFPA 70, National Electrical Code. Observation determined numerous electrical receptacles in the Kitchen 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 in the facility.	K 511	compliance	