

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 11/18/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 355033	(X2) MULTIPLE CONSTRUCTION A. BUILDING 02 B. WING _____		(X3) DATE SURVEY COMPLETED 02/16/2021
NAME OF PROVIDER OR SUPPLIER ST CATHERINES LIVING CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 1307 N 7TH ST WAHPETON, ND 58075		
(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	E 000			
K 000	A recertification survey conducted on 02/16/2021 found St Catherines Living Center in compliance with the requirements of 483.73 Long-Term Care Facilities Emergency Preparedness. INITIAL COMMENTS This survey used the 2012 edition of NFPA 101, Life Safety Code, Chapter 18-New Health Care Occupancies, 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 one-story building of Type V (000) construction. An addition attached to the structure was of Type II (111) 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. The 700 Wing of Type II (111) construction had undergone a major renovation in 2017. The 700 Wing was surveyed using Chapter 18. A Fire Safety Evaluation System (FSES) was conducted as a result of the 02/16/2021 Life Safety Code survey. The FSES was specifically used as an alternative safety method for Tag K 371 - Travel Distance within Smoke Compartment. The facility passes the FSES upon correction of all other deficiencies.	K 000			
K 371 SS=B	Subdivision of Building Spaces - Smoke Compar CFR(s): NFPA 101	K 371			2/25/21

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

TITLE

(X6) DATE

Electronically Signed

02/24/2021

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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K 371	Continued From page 1 Subdivision of Building Spaces - Smoke Compartments 2012 EXISTING Smoke barriers shall be provided to form at least two smoke compartments on every sleeping floor with a 30 or more patient bed capacity. Size of compartments cannot exceed 22,500 square feet or a 200-foot travel distance from any point in the compartment to a door in the smoke barrier. 19.3.7.1, 19.3.7.2 Detail in REMARKS zone dimensions including length of zones and dead-end corridors. This REQUIREMENT is not met as evidenced by: The facility failed to ensure the travel distance to reach a door in the required smoke barrier did not exceed 200 feet. Observation determined the 500/600 Wing smoke compartment exceeded the maximum 200 feet travel distance to reach the nearest smoke barrier. Failure to ensure travel distance within a smoke compartment complies with Life Safety Code requirements increases the risk of death or injury due to fire. This deficiency affected one (1) of three (3) smoke compartments.	K 371	A Fire Safety Evaluation System (FSES) was conducted as a result of the 02/16/2021 Life Safety Code survey. The FSES was specifically used as an alternative safety method for Tag K 371 - Travel Distance within Smoke Compartment. The facility passes the FSES upon correction of all other deficiencies.		
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	K 511		3/31/21	

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K 511	Continued From page 2 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 electrical equipment met the requirements of NFPA 70, National Electrical Code. Observation determined: 1) One (1) duplex electrical receptacle in the North Medication Room within 6 ft. of a sink was not ground-fault circuit-interrupter protected. 2) One (1) electrical receptacle in the 700 Wing Tub Room was not ground-fault circuit-interrupter protected. 3) Numerous electrical receptacles in the Kitchen were not ground-fault circuit-interrupter	K 511	Tag K511 1. The facility will replace all ground fault required outlets with GFCI outlets. 2. Maintenance will inspect the entire facility for outlets that should ground fault protected and do not meet NFPA code 70 and replace them immediately. 3. Maintenance will conduct a monthly inspection of all the facility outlets and immediate inspection of all new or replaced outlets ensuring all facility outlets meet NFPA code 70. 4. Maintenance will document the facility outlet inspection showing the compliance of NFPA code 70. 5. All facility outlets that are out of compliance will be replaced to meet NFPA code 70 no later than 3/31/2021.		

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K 511	Continued From page 3 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 electrical receptacles in the facility.	K 511			