OAK MANOR HEALTH CARE CENTER

K 062
NFPA 101 LIFE SAFETY CODE STANDARD

SS=F

Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically, 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5

This STANDARD is not met as evidenced by:
Based on record review, it was determined the facility failed to maintain and test the complete automatic sprinkler system quarterly as required.

The findings included:
Review of the facility's sprinkler testing reports in the social director's office on 12/6/10 at 8:50 AM, revealed that the testing for the sprinkler system had been completed on 2/22/10 and 6/6/10. This time span indicates the sprinkler system was not inspected quarterly as required.

K 144
NFPA 101 LIFE SAFETY CODE STANDARD

SS=D

Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1.

This STANDARD is not met as evidenced by:
Based on record review, it was determined the facility failed to test the emergency generator.

K 062
No ill effects were noted as a result of this deficient practice. All residents have the potential to be affected by this deficient practice. All quarterly sprinkler testing since June 2010 have been completed on time.

The Maintenance Director shall assure that the testing schedule is followed, with random oversight by the Administrator, and that any discrepancies are reported to the Quality Assurance (QA) Committee for review and further recommendations as needed. The QA Committee shall consist of the Administrator, Director of Nursing, Dietary Manager, Social Services Director and Activities Director.

K 144
No ill effects were noted as a result of this deficient practice. All residents have the potential to be affected by this deficient practice. All monthly tests since November 2009 have been timely completed and documented.

The Maintenance Director shall assure that the testing schedule is followed, with random oversight by the Administrator, and that any discrepancies are reported to the Quality Assurance (QA) Committee for review and further recommendations as needed. The QA Committee shall consist of the Administrator, Director of Nursing, Dietary Manager, Social Services Director and Activities Director.
The findings included:

Review of the facility's emergency generator reports, in the social director's office, on 12/6/10 at 8:48 AM, revealed the facility failed to exercise the generator for 30 minutes a month in November 2009.

NFPA 101 LIFE SAFETY CODE STANDARD

Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2

This STANDARD is not met as evidenced by: Based on observations, it was determined the facility failed to maintain all electrical wiring and components.

The findings included:

Observations during the initial tour on 12/6/10 revealed the following:

a. At 8:25 AM, the receptacle in the shower room next to the white oak nurses' station was not a ground fault circuit interrupter (GFCI) type receptacle.

b. The ice machine at the white oak nurses' station was not connected to a GFCI receptacle.

c. The two receptacles at the white oak nurses' station lavatory were not GFCI receptacles.

d. The ice machine in the storage room behind the laundry dryers had an exposed 110 volt wire where the cord connected to the machine.