K018. NFPA 101 LIFE SAFETY CODE STANDARD

S2c:
Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or
hazardous areas are substantial doors, such as those constructed of 1 1/2 inch solid-bonded core
wood, or capable of resisting fire for at least 20
minutes. Doors in sprinklered buildings are only
required to resist the passage of smoke. There is
no impediment to the closing of the doors. Doors
are provided with a means suitable for keeping
the door closed. Dutch doors meeting 19.3.8.3.8
are permitted. 19.3.6.3

Roller latches are prohibited by CMS regulations
in all health care facilities.

K018

The finished veneer on the door in room 1127 was repaired on the
date of the inspection 1/4/10 as noted in the 2567.

A review of 100% of all resident
room doors was conducted by
the Director of Maintenance
on 1/10/10 to ensure compliance
with the conditions of K018.

Resident room doors will be
inspected monthly and as needed
to ensure veneer on resident room
doors are replace as needed.

The results of the inspection of
the resident room doors will be
presented for three months
to the OASIS Assurance
Commission in order to additionally
comply with the requirements of
K018.

Preparation and submission of this plan of correction does
not constitute an admission or agreement by the provider
that a deficiency exist. The plan of correction is prepared
and submitted as a requirement under state and federal law.

The finding was noted by the maintenance
Director and acknowledged by the Facility

NHA
1-21-10
K 018 Continued from page 1

K 147 NFPA 101 LIFE SAFETY CODE STANDARD
SS=D

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

This STANDARD is met as evidenced by:
Based on observation during the survey, it was determined the facility failed to maintain the electrical system. National Fire Protection Association (NFPA) 70, 210-9(a)(7).

The findings include:

1. Observation on 01/04/10 at 9:30 AM revealed the Ground Fault Circuit Interrupter listed in room #124, #120, and #208 were not working.
2. At 10:30 AM observation within the resident room #120 in the 'C' Hall revealed the Ground Fault Circuit Interrupter unit was not working.
3. At 11:45 AM observation within the resident room 208 'A' Hall revealed the bathroom Ground Fault Circuit Interrupter unit was not working.
4. At 1:30 PM observation within the second floor ceiling area next to resident room #245 revealed a loose receptacle outlet that was not securely mounted. NFPA 70, 110-13(a).

Those findings were noted and verified by the Maintenance Director and later acknowledged by the Facility Administrator at the exit interview on 1/4/10.
K 147. Continued From page 2

The maintenance staff corrected all those deficiencies prior to the end of the survey.

The Director of Maintenance or his designee will inspect the Ground Fault Circuit Interrupter and receptacle outlets for a period of three months or until consistent compliance is maintained.

A Quality Assurance Study will be performed for three months to additionally ensure compliance with the conditions of K 147.

Preparation and submission of this plan of correction does not constitute an admission or agreement by the provider that a deficiency exist. The plan of correction is prepared and submitted as a requirement under state and federal law.