### Summary Statement of Deficiencies


- **K054**: All required smoke detectors, including those activating door hold-open devices, are approved, maintained, inspected and tested in accordance with the manufacturer's specifications. 9.6.1.3

  This STANDARD is not met as evidenced by:

  Based on observation, it was determined the facility failed to maintain the smoke detectors.

  The findings included:

  Observation of the 3rd floor nurses supply room on 1/4/11 at 10:25 AM, revealed the smoke detector was installed within 3 feet of the air diffuser. National Fire Protection Association 72, 2-3.5.1

  This finding was acknowledged by the Administrator and verified by the Director of Maintenance at the exit conference on 1/4/11.

- **K054**: No resident was affected by this finding.

  This standard will be met as evidenced by the following:

  The Maintenance Director moved the smoke detector away from the air diffuser in accordance with NFPA 72, 2-3.5.1.

  The Maintenance Director will conduct monthly inspections of smoke detectors to ensure facility is compliant with ruling.

  Findings will be reported monthly at QA&A x 3.


- **K084**: Portable fire extinguishers are provided in all health care occupancies in accordance with 9.7.4.1, 19.3.5.6, NFPA 10

  This STANDARD is not met as evidenced by:

  Based on observation, it was determined the facility failed to maintain the fire extinguishers.

  The findings included:

  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 patient. (See instructions.) Except for nursing homes, the findings stated above are disclaimable 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 disclaimable 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.
<table>
<thead>
<tr>
<th>ID/PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LEG IDENTIFYING INFORMATION)</th>
<th>ID/PREFIX TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETION DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>K 064</td>
<td>Continued From page 1 Observation of the 2nd floor corridor on 1/4/11 at 10:55 AM, revealed the fire extinguisher was last inspected in November 2010. National Fire Protection Association 10, 4.3.1. This finding was acknowledged by the Administrator and verified by the Director of Maintenance at the exit conference on 1/4/11.</td>
<td>K 064</td>
<td>All fire extinguishers were inspected and signed off by the Maintenance Director on 01-04-11. The Maintenance Director will conduct monthly inspections to ensure facility is compliant with NFPA ruling.</td>
<td>02-06-11</td>
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<tr>
<td>K 147 SS=E</td>
<td>Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code, 9.1.2</td>
<td>K 147</td>
<td>The Maintenance Director will report findings at QA&amp;A monthly x 3.</td>
<td>01-04-11</td>
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<td></td>
<td>This STANDARD is not met as evidenced by: Based on observation, it was determined the facility failed to maintain the fire extinguishers. The findings included: Observation of the 2nd floor corridor on 1/4/11 at 10:55 AM, revealed the fire extinguisher was last inspected in November 2010. National Fire Protection Association 10, 4.3.1. This finding was acknowledged by the Administrator and verified by the Director of Maintenance at the exit conference on 1/4/11.</td>
<td>K-147</td>
<td>This requirement was met on 01-04-11. The Maintenance Director attached the J-box cover to ensure all wiring was protected. The Maintenance Director will conduct monthly inspections of electrical boxes to ensure compliance with this requirement. The Maintenance Director will report findings at QA&amp;A monthly x 3.</td>
<td>01-04-11</td>
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