<table>
<thead>
<tr>
<th><strong>(X4) ID PREFIX TAG</strong></th>
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<td>K 104 SS=D</td>
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<td>12/13/10</td>
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**NFPA 101 LIFE SAFETY CODE STANDARD**

**Penetrations of smoke barriers by ducts are protected in accordance with 8.3.6.**

This **STANDARD** is not met as evidenced by:

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

The findings included:

- Observations of the 400 hall mechanical room on 12/13/10 at 1:55 PM, revealed a penetration above a 4 inch water line on the hall side.

**K 147 SS=D**

**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 observation, it was determined the facility failed to maintain electrical equipment.

The findings included:

- Observations of the ice room at the south nurses station on 12/13/10 at 7:50 AM, revealed a ground fault interrupter receptacle that would not shut the power off when the test button was manually pushed.

**Acceptance**

**POST 11/9/11**

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 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 30 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.