This Comparative Federal Life Safety Code (LSC) Survey was conducted on July 10, 2012. It was conducted as per the requirements of the Federal Register at 42CFR 483.70 (a) using the existing Health Care Section of the 2000 edition of the LSC and its referenced publications. This building was Type II (222), completely sprinklered and housed 25 beds. On the day of survey, census was 19.

The deficiencies determined during the survey are as follows:

**K 062: NFPA 101 LIFE SAFETY CODE STANDARD SS-E**
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 upon observation and staff interview during the survey, it was determined that the facility failed to provide the sprinkler system continuously maintained in reliable operating condition. The findings included:

- Approximately at 4:30 PM, it was observed that central shower room did not have a proper sprinkler coverage due to stall divider. This deficient practice affected 11 residents.

  This was verified with the maintenance staff at the time of discovery.

**K 147: NFPA 101 LIFE SAFETY CODE STANDARD**

Additional Sprinkler Head 7-11-12 installed on 7-11-12

Addendum, per request:
As noted above, the issue was resolved, and all areas have been surveyed and all are found to be in compliance.

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K 147

Continued From page 1

SUMMARY STATEMENT OF DEFICIENCIES
PREFIX: E   REGULATORY OR LSC IDENTIFYING INFORMATION:
TAG: SS-C

K 147

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

This STANDARD is not met as evidenced by:
It was determined by observation and staff interview during the survey, that the facility failed to maintain its electrical wiring and equipment in accordance with NFPA 70. The findings included:

Approximately at 4:45 PM, it was observed that information systems room located on LL1 multiple extension cords connected together (daisy chain). This deficient practice affected 11 people.

This was verified with maintenance staff at the time of discovery.

1. Additional receptacles in 7125/12 stalled and extension cords removed; also explanation of procedure for use of receptacles given time of installation

2. IS desk side team lead ongoing will perform monthly checks to ensure compliance

Addendum

As noted above, the issue was resolved with plans in place for monthly checks. Similar areas have been surveyed and all are in compliance. Additionally, these areas will be added to the Environment of Care Committee's semiannual survey and oversight.