<table>
<thead>
<tr>
<th>ID</th>
<th>PREFIX</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
</tr>
</thead>
<tbody>
<tr>
<td>K 038</td>
<td>SS=D</td>
<td>NFPA 101 LIFE SAFETY CODE STANDARD</td>
<td>Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1</td>
</tr>
<tr>
<td>K 076</td>
<td>SS=D</td>
<td>NFPA 101 LIFE SAFETY CODE STANDARD</td>
<td>Medical gas storage and administration areas are protected in accordance with NFPA 99, Standards for Health Care Facilities.</td>
</tr>
</tbody>
</table>

(a) Oxygen storage locations of greater than 3,000 cu.ft. are enclosed by a one-hour separation.

(b) Locations for supply systems of greater than 3,000 cu.ft. are vented to the outside. NFPA 99 4.3.1.1.2, 19.3.2.4

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 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.
This STANDARD is not met as evidenced by:
Based on observation, it was determined the facility failed to keep oxygen bottles in a secure condition to prevent damage.

Observations of the oxygen storage room outside the dining room on 6/18/13 at 9:00 AM, revealed 1 of 4 bottles of oxygen was not secured.

The finding was acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit interview on 6/18/13.

NFPA 101 LIFE SAFETY CODE STANDARD

Where Alcohol Based Hand Rub (ABHR) dispensers are installed in a corridor:
1. The corridor is at least 6 feet wide
2. The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms)
3. The dispensers have a minimum spacing of 4 ft from each other
4. Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet
5. Dispensers are not installed over or adjacent to an ignition source.
6. If the floor is carpeted, the building is fully sprinklered. 19.3.2.7, CFR 403.744, 418.100, 460.72, 482.41, 483.70, 483.623, 485.623

NFPA 101 LIFE SAFETY CODE STANDARD

REQUIREMENT:
Medical gas storage and administration areas are protected in accordance with NFPA 99, Standards for Health Care Facilities.

CORRECTIVE ACTION:
1. On 6/21/13, the Maintenance Supervisor secured the oxygen cylinders properly in the oxygen storage room properly in the oxygen storage room outside the dining room.
2. On 6/21/13, the Maintenance Supervisor inspected the facility to ensure that all the oxygen cylinders in the facility were properly secured.
3. On 6/21/13, the Maintenance Supervisor was interviewed by the Administrator regarding proper storage of oxygen cylinders.
4. The Maintenance Supervisor and Administrator will monitor for compliance weekly through the facility rounds and report the findings to the Quality Assurance Committee.

COMPLETION DATE:
6/21/2013
**K 211** Continued From page 2

This STANDARD is not met as evidenced by:
Based on observation, it was determined the facility had installed an alcohol based hand rub dispenser adjacent to an ignition source.

The findings included:
Observation of the therapy room on 6/18/13 at 1:15 PM, revealed an alcohol based hand rub dispenser had been installed adjacent to an electrical switch.

The finding was acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit interview on 6/18/13.

**K 211**

**NFPA 101 LIFE SAFETY CODE STANDARD REQUIREMENT:**
Where Alcohol Based Hand Rub (ABHR) dispensers are installed in a corridor:

0 The Corridor is at least 6 feet wide
0 The maximum individual fluid dispenser capacity shall be 1.2 liters (2 liters in suites of rooms)
0 The dispensers have a minimum spacing of 4 ft from each other
0 Not more than 10 gallons are used in a single smoke compartment outside a storage cabinet.
0 Dispensers are not installed over or adjacent to an ignition source.
0 If the floor is carpeted, the building is fully sprinklered. **19.5.2.7, CFR 403.744, 418.100, 460.72, 482.41, 483.70, 483.623, 485.623**

**CORRECTIVE ACTION:**
1. On 6/18/13, the Maintenance Supervisor moved the alcohol based hand rub dispenser that is in the therapy room, and installed it so that it wasn't over or adjacent to an ignition source.
2. On 6/18/13, the Maintenance Supervisor inspected the facility to ensure that there are no alcohol based hand rub dispensers that are over or adjacent to an ignition source.
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<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETION DATE</th>
</tr>
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<tbody>
<tr>
<td>K 211</td>
<td>Continued From Page 3</td>
<td>K 211</td>
<td>3. On 6/18/13, the Maintenance Supervisor was inserviced by the Administrator on proper installation of alcohol based hand rub dispensers. 4. The Maintenance Supervisor and Administrator will monitor for compliance weekly through facility rounds and report the findings to the Quality Assurance Committee.</td>
<td>6/18/13</td>
</tr>
</tbody>
</table>