K 018: The King's Daughters and Sons Home will ensure that doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas are substantial doors, such as those constructed of 1½ 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 19.3.6.3.6 are permitted. 19.3.6.3

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

The King's Daughters and Sons Home shall ensure that there is no impediment to the closing of these doors and that these doors are provided with a means suitable for keeping the door closed.

The rubber wedge used to prop open the kitchen service hall door has been removed and staff have received instruction regarding not using objects hold doors open.

The 20 minute fire doors in the dining room have been repaired and now close properly.

The 20 minute fire doors in the one south corridor have been repaired and now close to latch.

(K 018 continued next page)
K 018: Continued From page 1

knob to a metal shelf.

3. Observations of the 3 sets of 20 minute fire
doors in the dining room on 3/12/12 at 9:30 AM,
revealed the third set of doors would not close.

4. Observations of the four sets of 20 minute fire
doors in the corridor revealed the one south set of
doors by resident room 101 on 3/12/12 at 10:09
AM, would not latch when closed.

These findings were acknowledged by the
Administrator and verified by the Maintenance
Supervisor at the exit conference on 3/12/12.

K 050
NFPA 101 LIFE SAFETY CODE STANDARD

Fire drills are held at unexpected times under
varying conditions, at least quarterly on each shift.
The staff is familiar with procedures and is aware
that drills are part of established routine.
Responsibility for planning and conducting drills is
assigned only to competent persons who are
qualified to exercise leadership. Where drills are
conducted between 9 PM and 6 AM a coded
announcement may be used instead of audible
alarms. 19.7.1.2

This STANDARD is not met as evidenced by:
Based on observation and review of fire drill
procedures, it was determined the facility staff
failed to perform their assigned duties according
to the policies and procedures manual.

The findings included:

Observations of the fire drill conducted on 3/12/12

K 018 (K 018 Continued)

The Head, Maintenance Department
shall be responsible for ensuring that the
fire safety of the building is
maintained at all times. He shall
conduct monthly inspections of all
doors to ensure that they close
properly and shall report his findings
to the Continuous Quality
Improvement Committee.

The King's Daughters and Sons Home
will ensure that fire drills are held at
unexpected times under varying
conditions, at least quarterly on each
shift. We will ensure that staff is
familiar with procedures and is aware
that drills are part of established
routine.

The staff involved with the fire drill
on March 12, 2012 were immediately
instructed on why the drill failed and
the proper procedure for announcing
fire situations.

Staff will receive in-service education
on March 29, 2012 on proper
procedures during actual fires and fire
drills by the Head, Maintenance
Department and the Administrator.

(K 050 continued on next page)
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**Summary of Deficiencies**

K 050: Continued From page 2

at 2:45 PM, revealed that staff did not call out location of fire when entering the fire event area. Review of the fire drill policy and procedure documented that staff will call out "Code Red" and the location when entering the fire event area.

These findings were acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit conference interview on 3/12/12.

K 062: NFPA 101 LIFE SAFETY CODE STANDARD SS=D 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 on observation, it was determined the facility failed to maintain the sprinkler heads.

The findings included:

Observations of the maintenance area behind the dryers on 3/12/12 at 9:35 AM, revealed 1 of the 2 sprinkler heads was covered with a heavy layer of laundry lint.

This finding was acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit conference interview on 3/12/12.

K 064: NFPA 101 LIFE SAFETY CODE STANDARD

(K 050 Continued)

The Head, Maintenance Department shall be responsible for ensuring that the fire safety of the building is maintained at all times. He shall conduct quarterly fire drills for all three shifts and will immediately instruct staff should staff fail to properly carry out their expected responsibilities during the fire drill. A report on all fire drills will be forwarded to the Continuous Quality Improvement Committee.

(K 062)

The King’s Daughters and Sons Home shall ensure that required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically.

The dust was removed from the sprinkler head in the maintenance area behind the dryers on March 12, 2012.

The Head, Maintenance Department shall be responsible for ensuring that the automatic sprinkler systems are continuously maintained and are in reliable operating condition to include that the heads are free from dust.

(K 064 started on next page)
K 064: Continued From page 3

SS=D

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:
National Fire Protection Association (NFPA) 10 Portable Fire Extinguishers. 1-6.5 Extinguishers shall not be obstructed or obscured from view.

Based on observation, it was determined the facility failed to maintain 3 feet of clear access to 3 of 35 fire extinguishers.

The findings included:

1. Observations of the kitchen on 3/12/12 at 9:20 AM, revealed 2 fire extinguishers (1 dry and 1 K-gard) by the center stainless steel hand washing sink that was obstructed with a steam table and a 32 gallon waste container.

2. Observations of the dining room revealed a fire extinguisher obstructed by 2 dining chairs, a walker, and a soiled linen container on 3/12/12 at 9:25 AM.

These findings were acknowledged by the Administrator and verified by the Maintenance Supervisor at the exit conference interview on 3/12/12.

(K 064 started from previous page)

The King’s Daughters and Sons Home shall ensure that portable fire extinguishers are provided in all health care occupancies in accordance with 9.7.4.1 19.3.5.6, NFPA 10.

The steam table and 32 gallon waste container were placed in new positions which ensure that there is a 3 foot clear access to the fire extinguishers near the stainless steel hand washing sink.

The soiled linen container and other obstacles near the fire extinguisher in the dining room were relocated.

The Head, Maintenance Department shall be responsible for ensuring that all fire extinguishers are unobstructed at all times. He shall check for obstructions daily while making inspection rounds in the building.

Staff will receive in-service training on March 29, 2012 by the Head, Maintenance Service on ensuring that fire extinguishers are not obstructed.