WAYNE CARE NURSING HOME

K 027
NFPA 101 LIFE SAFETY CODE STANDARD

Door openings in smoke barriers have at least a 20-minute fire protection rating or are at least 1½-inch thick solid bonded wood core. Non-rated protective plates that do not exceed 48 inches from the bottom of the door are permitted. Horizontal sliding doors comply with 7.2.1.14. Doors are self-closing or automatic closing in accordance with 19.2.2.2.6. Swinging doors are not required to swing with egress and positive latch is not required. 19.3.7.5, 19.3.7.6, 19.3.7.7

This STANDARD is not met as evidenced by:
Based on observation, it was determined that the facility failed to maintain all fire doors.

The findings included:
Observations at the North end of the corridor by room 101 on 8/9/10 at 10:09 AM, revealed 1 of the 2 sets of fire doors did not close and latch.

K 051
NFPA 101 LIFE SAFETY CODE STANDARD

A fire alarm system with approved components, devices or equipment is installed according to NFPA 72, National Fire Alarm Code, to provide effective warning of fire in any part of the building. Activation of the complete fire alarm system is by manual fire alarm initiation, automatic detection or extinguishing system operation. Pull stations in patient sleeping areas may be omitted provided that manual pull stations are within 200 feet of nurses' stations. Pull stations are located in the path of egress. Electronic or written records of tests are available. A reliable second source of power is provided. Fire alarm systems are

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 patients. (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.
<table>
<thead>
<tr>
<th>ID</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSO IDENTIFYING INFORMATION)</th>
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<tr>
<td>K 051</td>
<td>Continued From page 1 maintained in accordance with NFPA 72 and records of maintenance are kept readily available. There is remote annunciation of the fire alarm system to an approved central station. 19.3.4, 9.6</td>
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<tr>
<td>K 056</td>
<td>NFPA 101 LIFE SAFETY CODE STANDARD</td>
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This STANDARD is not met as evidenced by:
Based on observations and interview, it was determined that the facility failed to ensure the fire alarm annunciation panel at the nurses' station was signaling a problem when the primary phone line was not functioning.

The findings included:
Observations and interview at the fire alarm panel on 8/9/10 at 9:45 AM, the maintenance director told the surveyor the primary phone line was down to the fire alarm panel and the fire alarm was showing trouble. The fire alarm system was located in a closet off the corridor and the system was giving off an audible sound that could not be heard clearly outside the closet and the annunciation at the nurses' station was not receiving a signal that the system was having trouble.

Additional actions taken:
- The facility will ensure that the alarm annunciation panel at the nurses station will signal a problem when the primary phone line is not functioning.
- Internation Fire Protection added a monitor module for the dialer and repaired the annunciation. The nursing station panel will not signal if there is a problem with the phone line (see attached). The panel and alarms will routinely be monitored by maintenance and repairs completed as discovered.

If there is an automatic sprinkler system, it is installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, to
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<th>PROVIDER'S PLAN OF CORRECTION</th>
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<td>K056</td>
<td>Continued From page 2</td>
<td>provide complete coverage for all portions of the building. The system is properly maintained in accordance with NFPA 25, Standard for the Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems. It is fully supervised. There is a reliable, adequate water supply for the system. Required sprinkler systems are equipped with water flow and tamper switches, which are electrically connected to the building fire alarm system. 19.3.5</td>
<td>K056</td>
<td></td>
<td>The facility will ensure that an obstruction test of the sprinkler system is conducted every 5 years. Internation Fire Protection completed the five year inspection with photos taken of branch lines and cross mains (see attached). The time frame for the next inspection will be noted by maintenance to ensure timely inspection.</td>
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This STANDARD is not met as evidenced by:
Based on record review, it was determined that the facility failed to ensure an obstruction test of the sprinkler system was conducted every 5 years.

The findings included:
Review of the sprinkler system records from 11/20/03 to present revealed there was no 5 year obstruction test conducted.