**K073**  
**NFPA 101 LIFE SAFETY CODE STANDARD**

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No furnishings or decorations of highly flammable character are used. 19.7.5.2, 19.7.5.3, 19.7.5.4

This STANDARD is not met as evidenced by:

Based on observation and staff interview, the facility failed to document if combustible decorations and floral arrangements were fire retardant (NFPA 110, 19.7.5.4). The findings include:

Observation and interview with the Maintenance Director, on October 10, 2010 between 9:00 a.m. and 2:00 p.m. confirmed the facility failed to provide documentation that combustible decorations throughout the facility were treated with fire retardant material.

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1. **Any combustible decorations and floral arrangements will be treated with fire retardant material.**

   A log will be kept indicating the item treated along with the room number and date.

   Items will be marked with permanent marker indicating they have been treated.

   Message will be placed in the facility newsletter alerting family members that all decorations must be treated with fire retardant material.

   Staff will be in-serviced regarding combustible decorations.

4. **Administration will monitor compliance for use of flammable decorations during quarterly leadership rounds.**

   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.