K 038
NFPA 101 LIFE SAFETY CODE STANDARD

Exit access is arranged so that exits are readily accessible at all times in accordance with section 7.1. 19.2.1

This STANDARD is not met as evidenced by:
Based on observation it was determined the facility failed to maintain the exits.
The findings include:
Observation of the service hall exit on 2/15/11 at 7:40 AM, revealed the door was cover up with plastic covering. National Fire Protection Association (NFPA) 101, 7.5.1.1

This finding was acknowledged by the Administrator and verified by the Director of Maintenance at the exit conference on 2/15/11.

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:

The Tuff-Flex Plastic Fly Guard has been removed from the door.
All exit doors have been checked to assure there are no materials mounted on any exit doors that impede exit through the doors.
No materials will be mounted on any exit that impede any exit through the doors.
The maintenance director will monitor for compliance and report any instance of non-compliance to the Quality Assurance Committee. The Quality Assurance Committee consists of the Administrator, Business Office Manager, Director of Nursing, Assistant Director of Nursing, Quality Assurance Nurse, MDS Coordinator, Care Plan Coordinator, Maintenance Director, Dietary Manager, Social Services Director, Activity Director, Therapy Program Manager, and Medical Director.

Fire drills will continue to be conducted on all three shifts at various times. All patient room doors will be closed and residents will not be moved through smoke doors into the smoke compartment.

During all fire drills staff will be monitored to make sure all patient room doors are closed and no residents are moved through smoke doors in to the smoke compartment.
K 060

Continued from page 1

Based on observations it was determined the facility failed the fire drill. The findings include:

Observations during the fire drill on 2/15/11 at 8:15 AM, revealed the staff failed to close the room door and moved a resident through the smoke doors into the smoke compartment of the fire. National Fire Protection Association (NFPA) 101, 19.2.3

These findings were acknowledged by the Administrator and verified by the Director of Maintenance at the exit conference on 2/15/11. NFPA 101 LIFE SAFETY CODE STANDARD

K 087

SS=E

Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2

This STANDARD is not met as evidenced by:

Based on observation it was determined the facility failed to maintain the Heating, Ventilating, and Air Conditioning System (HVAC).

The findings include:

Observation of the C Wing nurses station's bathroom on 2/15/11 at 7:30 AM, revealed no exhaust fan was installed in the room. National Fire Protection Association (NFPA) 101, 19.5.2.1

This finding was acknowledged by the
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Administrator and verified by the Director of Maintenance at the exit conference on 2/15/11.