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FORM APPROVED
OMB NO. 0938-0391

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING	(X3) DATE SURVEY COMPLETED
	50G032		01/06/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARLTON GROUP HOME	26509 NE VIRGINIA ST. PO BOX 61 DUVALL, WA 98019

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
K 000	INITIAL COMMENTS Surveyor: 19192 This report is the result of an unannounced Fire and Life Safety re-certification survey conducted at Carlton Group Home on 1/6/2015 by a representative of the Washington State Patrol, Fire Protection Bureau. The survey was conducted in concert with the Washington State Department of Social and Health Services (DSHS) health survey teams. The facility has a total of 6 beds and at the time of this survey the census was 6. The existing section of the 2000 Life Safety Code was used in accordance with 42 CFR 483.70. The facility is a two story structure of Type V-A construction with exits to grade. The facility is protected by a Type 13 fire sprinkler system throughout and an automatic fire alarm system with corridor smoke detection. All exits are to grade with paved exit discharges to the public way. The facility is not in compliance with the 2000 Life Safety Code as adopted by the Centers for Medicare & Medicaid Services. The surveyor was: Donald L West Deputy State Fire Marshal	K 000		
K0050	48..470(j)(1)(i) LIFE SAFETY CODE STANDARD	K0050		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

ED — 1/12/15

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.

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K0050	Continued From page 1 All residents capable of assisting in their evacuation are trained in the proper actions to take in the event of a fire. 33.7.2 Fire exit drills are conducted twelve times per year, quarterly on each shift. Drills involve actual evacuation to a selected assembly point and provide experience in exiting through all exits. Exits not used in any fire drill are not credited in meeting the requirements of the code. 42 CFR 483.470 Subpart L This Standard is not met as evidenced by: Surveyor: 19192 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 requirement is not met as evidenced by: Based upon record review and staff interviews on 1/6/2015 between approximately 1200 and 1330 hours the facility has failed to provide fire drill records reflecting drills being conducted on all shifts for the past 12 months. This could potentially result in the staff not responding in a coordinated manner in the event of a fire or other emergency and endangering residents, staff and/or visitors. The findings include, but are not limited to: 1. There are no day shift or night shift drills to review for the first quarter.	K0050	K0050 The facility had two fire drills performed during the day shift for the first quarter (January, February, and March 2014). The January fire drill was performed at 3:15pm which is second shift (3pm-10pm). The March fire drill was performed at 2:10pm which is first shift (8am-3pm). The facility missed the February fire drill so there were no night shift fire drills performed during the first quarter. To prevent this from occurring again we have hired a new facility manager. The facility manager will highlight the day on the calendar that the staff are to perform the fire drill and write down what shift and time the drill will be conducted. The facility manager will chose a date that is at least a week prior to months end to ensure that there is time to perform the fire drill if the staff cannot do it on the scheduled highlighted date. If the fire drill is not conducted on the scheduled date the staff on shift for that day will inform the facility manager and QIDP of the reason why it was not done. The facility manager will reschedule the drill before the end of the month. The facility manager will have the dates, times, and shifts for the entire year marked on the calendar by January 12, 2015.	

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K0050	Continued From page 2 2. There are no night shift drills to review for the second quarter The above was discussed and acknowledged by the manager.	K0050	The facility had three fire drills performed during the day shift for the second quarter (April, May, and June 2014). There was no nightshift drills performed during second quarter. To prevent this from occurring again we have hired a new facility manager. The facility manager will highlight the day on the calendar that the staff are to perform the fire drill and write down what shift and time the drill will be conducted. The facility manager will chose a date that is at least a week prior to months end to ensure that there is time to perform the fire drill if the staff cannot do it on the scheduled highlighted date. If the fire drill is not conducted on the scheduled date the staff on shift for that day will inform the facility manager and QIDP of the reason why it was not done. The facility manager will reschedule the drill before the end of the month. The facility manager will have the dates, times, and shifts for the entire year marked on the calendar by January 12, 2015.	
K0056	483.470(j)(1)(i) LIFE SAFETY CODE STANDARD PROMPT Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7, 33.2.3.5.2 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. Exception No. 1: In prompt evacuation facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and two Family Dwellings and Manufactured Homes, is permitted. Automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier. Exception No. 2: Not applicable Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.	K0056	K0056 The current confidence test report will be onsite by February 1, 2015. We do not receive the report until Infinity bills our main office and the report is attached to the bill. The maintenance supervisor is working with Infinity to see if we can have the confidence tests emailed to himself and the QIDP in order to speed up the process. Going forward the maintenance supervisor will make sure to schedule the confidence test at least two weeks prior to the expiration of the one from the previous year. This should ensure that we have the confidence test back from Infinity before the Fire Marshal inspection. The confidence test report will be stored in the facilities Fire Drill book under the tab confidence test. The maintenance supervisor and facility manager will make sure we have the most current confidence test filed as soon as we receive it from Infinity.	

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K0056	Continued From page 3 Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted. Exception No. 5: Not applicable Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5. SLOW Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. Exception No. 1: Not Applicable Exception No. 2: Not Applicable Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier. Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with	K0056		

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K0056	Continued From page 4 NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted. Exception No. 5: Not Applicable Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5. IMPRACTICAL Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. 33.2.3.5.2. Exception No. 1: Not Applicable. Exception No. 2: In slow and impractical evacuation capability facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and Two Family Dwellings and Manufactured Homes, with a 30 minute water supply, is permitted. All habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier. Exception No. 3: Not Applicable. Exception No. 4: Not Applicable. Exception No. 5: In impractical evacuation	K0056		

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K0056	Continued From page 5 capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted. All habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier. Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5. This Standard is not met as evidenced by: Surveyor: 19192 If there is an automatic sprinkler system, it is installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, to 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 This requirement is not met as evidenced by: Based upon observations and staff interviews on 1/6/2015 between approximately 1200 and 1330 hours the facility has failed to provide fire	K0056		

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K0056	Continued From page 6 sprinkler protection to all required areas of the facility. This could result in a fire not being contained to the area of origin and could endanger residents, staff and/or visitors. The findings include, but are not limited to: 1. There is no current confidence test report for the inspection that was conducted on 1/2/2015. The above was discussed and acknowledged by the manager.	K0056		