

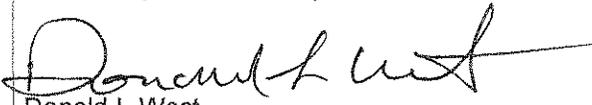
DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

Printed: 12/10/2013
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505473	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 12/10/2013
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NAME OF PROVIDER OR SUPPLIER UNIVERSITY PLACE CARE CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 5520 BRIDGEPORT WAY WEST UNIVERSITY PLACE, WA 98467
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(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
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K 000	<p>INITIAL COMMENTS</p> <p>Surveyor: 19192 On December 10, 2013 an unannounced fire and life safety code recertification survey was conducted at University Place Care Center located at 5520 Bridgeport Way West, University Place Wa, 98467 by a representative of the Washington State Patrol, State Fire Marshal's Office, this survey was conducted using the existing section of the 2000 life safety code in accordance with 42 CFR 483.70.</p> <p>This facility is a single story type V-A structure with a partial basement, the exiting is direct to grade from both levels, the building is protected throughout by a full NFPA 13 fire sprinkler system and automatic detection</p> <p>This facility has a licensed capacity of 120 resident with a census today of 86.</p> <p>The facility is not in compliance at this time.</p>  Donald L West Deputy State Fire Marshal	K 000	<p><u>The following written allegation of compliance is intended to meet the requirements for a plan of correction under state and federal law and is not an admission that the survey findings are correct or that they rise to the level of deficiencies under applicable law.</u></p> <p><u>K-056</u></p> <p>The dry pendant sprinkler heads in the walk in cooler and freezer are scheduled to be evaluated by fire consultant group in 12/20/13. If they require replacement, then the company will order parts and schedule replacement as soon as possible.</p> <p>No other issues were noted.</p> <p>The Maintenance Director was inserviced on the requirement. Cascade Alarm will add the dry pendant sprinkler checks to their annual review of system.</p>	
K 056 SS=D	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>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</p>	K 056		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Christine Miller</i>	TITLE LNHA	(X6) DATE 12/19/13
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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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K 056	<p>Continued From page 1</p> <p>systems are equipped with water flow and tamper switches, which are electrically connected to the building fire alarm system. 19.3.5</p> <p>This Standard is not met as evidenced by: Surveyor: 19192 During the facility tour on December 10, 2013 from 0800 to 1145 it was observed that the facility failed to maintain the fire sprinkler system in accordance with NFPA 13, this has the potential for the system to fail in the event of a fire, this finding was acknowledged at the time of the survey by the facility Administrator and maintenance director. The finding was:</p> <p>1. The dry pendant sprinkler heads in the walk in cooler and freezer appear to be more than 10 years old and are required to be tested or replaced.</p>	K 056	<p>Audits will be conducted by the Maintenance Director or or designee to determine ongoing compliance. Results will be forwarded to Quality Assurance Committee for review of trends/patterns.</p> <p>Correction Date: 1-20-14 and on-going</p> <p>Administrator or designee will be responsible for compliance.</p>	

Christine Muller, LHA 12/19/13