

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

Printed: 04/26/2013
FORM APPROVED
OMB NO. 0938-0391

601

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505435	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 04/26/2013
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NAME OF PROVIDER OR SUPPLIER TACOMA LUTHERAN HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1301 N HIGHLANDS PARKWAY TACOMA, WA 98406
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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 April 26, 2013 an unannounced fire and life safety code recertification survey was conducted a Tacoma Lutheran Home located at 1301 North Highlands Park Way, Tacoma WA 98406 by a representative of the Washington State Patrol State Fire Marshal's Office. The existing section of the 2000 life safety code was used in accordance with 42 CFR 483.70.</p> <p>This facility is a single story type V-A structure with exiting direct to grade level, the building is protected throughout by a full NFPA 13 fire sprinkler system and an automatic smoke detection system.</p> <p>The facility has a licensed capacity of 190 with a census today of 154 residents.</p> <p>The facility is not in compliance at this time.</p> <p>Following are the deficiencies cited as a result of this survey:</p> <p> Deputy State Fire Marshal</p>	K 000	<p>Tacoma Lutheran Retirement Community (TLRC) has requested a continuing waiver of enforcement of K-147. Use of power strips in resident rooms is necessary at this time as we are unable to add electrical outlets needed to each room at one time due to the financial hardship upon this facility. However, the facility has begun a remodeling plan that will correct this deficiency over a period of the next five years. To date, we have added additional outlets to 20 of our 100 resident rooms. It is our plan to remodel 16 additional rooms each year.</p> <p>TLRC has contracted with an electrical contractor to review the electrical system to determine the amperage used in each of the remaining rooms occupied by our residents. He has certified that the buildings electrical system is able to safely carry the load with the addition of power strips to existing resident rooms while posing no threat to the health and safety of our residents.</p> <p>Until the remodel of all of the remaining resident rooms, the power strips approved for use will have the following features: UL Listed; over current protection with reset. 15 amps maximum, 14 gauge cord and shall have a polarized plug or a three-pronged plug.</p>	
K 147 SS=F	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2</p> <p>This Standard is not met as evidenced by: Surveyor: 19192 During the facility tour on April 26, 2013 from</p>	K 147	<p>To ensure the ongoing safety of the residents during this project, the facility will take the additional following actions: Monitor power strip use; the Housekeeping staff will be educated about how to visually inspect power strips daily during their routine room visits and the proper position and setting for the power strips. Housekeeping staff will report to maintenance any damage or signs of degradation; power strips that are not working properly or have frayed wires will be</p>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE President/CEO	(X6) DATE 5/6/13
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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 147	Continued From page 1 0930 to 1330 it was observed that the facility failed to maintain the building free of the use of power strips in the resident sleeping rooms, this has the potential for the over loading of circuits, this finding was acknowledged at the time of the survey by the facility maintenance director. The finding was: 1. In resident rooms there are power strips in use at various appliances.	K 147	replaced immediately; power strips shall be located as to not incur damage and are not placed in moist environments or covered by carpet or furniture; power strips shall not be stapled, tacked or taped; a power strip shall not be plugged into another power strip. The Maintenance Director will report to the President/ CEO any power strips found in poor repair or that needed replacement as identified weekly.	5/24/13