

Division of Health Improvement

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 2055	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - GRAND COURT ALBUQUE B. WING _____	(X3) DATE SURVEY COMPLETED 10/07/2008
NAME OF PROVIDER OR SUPPLIER GRAND COURT ALBUQUERQUE (THE)		STREET ADDRESS, CITY, STATE, ZIP CODE 300 VALENCIA DRIVE SE ALBUQUERQUE, NM 87108		
(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) COMPLETE DATE
A 01	OPENING REMARKS Surveyor: 25921	A 01		
A43	7 NMAC 8.2.43 Maintenance of Building & Grounds 7.8.2.43 MAINTENANCE OF BUILDING AND GROUNDS: The building(s) must be maintained in good repair at all times. Such maintenance shall include, but is not limited to, the following: A. All electrical, fire protection signaling, mechanical, telephone, water supply, heating, fire protection, and sewage disposal systems maintained in a safe and functioning condition, including regular inspections of these systems, (as applicable). B. The building, furniture and furnishings, storage areas, and grounds of the facility must be maintained in a safe, sanitary, and presentable condition at all times. C. Storage areas must be kept free from accumulation of refuse, discarded furniture, old newspapers, that create a fire hazard. D. Floors shall be maintained stable, firm, slip-resistant and free of tripping hazards. [7-1-64, 9-15-70, 9-24-76, 7-11-86, 4-7-97; 7.8.2.43 NMAC - Rn, 7 NMAC 8.2.43, 8-31-00] This REQUIREMENT is not met as evidenced by: Surveyor: 25921 Based on observation and staff interview, the facility's practice failed to ensure all fire protection systems including smoke barriers and doors and shutters in smoke barriers are self-closing or automatic closing in accordance with the requirements, maintained in safe and functioning condition including regular inspections of these systems. This deficient practice potentially affects all residents and staff throughout the facility. The	A43		

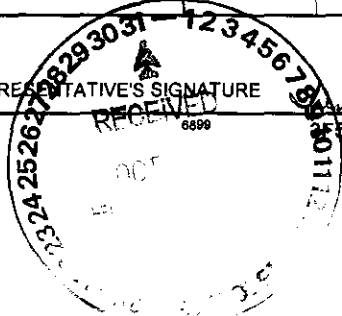
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Division of Health Improvement

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
STATE FORM

TITLE

(X6) DATE



Shane Washfield, Executive Director 10/29/08

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A43	Continued From page 1 licensed capacity of the facility is 100, the census during the survey was 61. The findings are: On October 7, 2008, between 8:30 pm and 11:30 am, During a tour of the facility with the Director of Maintenance, the Life Safety Code Surveyor observed the following: 1. The entrance door to the kitchen was being held open with a chair place between the door and a food rack in the kitchen hall. 2. The exit door to the kitchen was being held open with a towel placed between the bottom of the door and the floor. 3. The Director of Maintenance stated that he would have the items removed. Based on observation and staff interview, the facility's practice failed to ensure that the electrical system and its components are maintained in accordance with NFPA 70 (National Electric Code). This deficient practice potentially affects all residents and staff throughout the facility. The licensed capacity of the facility is 100, the census during the survey was 61. The findings are: On October 7, 2008, between 8:30 pm and 11:30 am, During a tour of the facility with the Director of Maintenance, the Life Safety Code Surveyor observed the following: 1. Within the Facilities Laundry Room on the 1, 2 and 3 floors, behind the washers and dryers,	A43	Staff have been inserviced to keep doors to the kitchen closed at all times. Dining Service Director will be responsible to see that this is occurring. Completion date: 10/8/08 GFIC outlets replaced by the Maintenance Director. Completion date: 10/28/08 Heat detectors and smoke detectors will be placed in the kitchen area by Simplex-Grinnell. Completion date: 11/30/08 Back-up batteries were replaced in the main fire alarm control panel and annunciator panel in the phone room by Simplex-Grinnell on 10/24/08. Sprinkler heads will be cleaned or replaced by Simplex-Grinnell by 11/30/08.	10/8/08 10/28/08 11/30/08 10/24/08 11/30/08

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A43	Continued From page 2 there were two(2) electrical outlets within two(2) feet of the water supply that were not GFIC (Ground Fault Interrupt Circuit) protected. 2. The drinking fountain between the men and women restrooms on the first floor had an electrical outlet within two (2) feet of the water supply that was not GFIC (Ground Fault Interrupt Circuit) protected. 3. The Director of Maintenance stated that the outlets would be replaced with GFIC outlets.	A43		
A60	7 NMAC 8.2.60 Fire Alarms, Smoke Detectors, and other Equip 7.8.2.60 FIRE ALARMS, SMOKE DETECTORS AND OTHER EQUIPMENT: A. FIRE ALARM SYSTEM: A manual fire alarm system shall be provided. The manual fire alarm must be inspected and approved in writing by the fire authority having jurisdiction. EXCEPTION: Adult residential care facilities with three (3) or fewer residents are not required to have a fire alarm system. B. SMOKE AND HEAT DETECTION: Approved smoke detectors shall be installed on each floor to provide when activated an alarm which is audible in all sleeping areas. Areas of assembly such as the dining and living room must also be provided with smoke detectors. (1) Detectors shall be powered by the house electrical service and have battery back up. (2) Construction of new facilities or facilities remodeling or replacing existing smoke detectors shall provide detectors in common living areas and in each sleeping room.	A60		

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A60	<p>Continued From page 3</p> <p>(3) Smoke detectors must be installed in corridors at no more than thirty (30) foot spacing.</p> <p>(4) Heat detectors shall be installed in all enclosed kitchens and also powered by the house electrical service. [9-24-76, 7-11-86, 1-11-90, 4-7-97; 7.8.2.60 NMAC - Rn, 7 NMAC 8.2.60, 8-31-00]</p> <p>This REQUIREMENT is not met as evidenced by: Surveyor: 25921 Based on observation, and staff interview, the facility's practice failed to ensure that the fire alarm system and its components (including heat detectors) are installed, tested and maintained in accordance with NFPA 72 (National Fire Alarm Code). This deficient practice potentially affects all residents and staff throughout the facility. The licensed capacity of the facility is 100, the census during the survey was 61. The findings are:</p> <p>On October 7, 2008, between 8:30 pm and 11:30 am, During a tour of the facility with the Director of Maintenance, the Life Safety Code Surveyor observed the following:</p> <ol style="list-style-type: none"> 1. Within the Kitchen, the presents of a heat detector was not in evidence. 2. The main fire alarm control panel and annunciator panel in the phone room, had back-up batteries that were dated 10/31/03 and have not been replaced every two years as required. 3. The Director of Maintenance stated that the batteries would be replaced and a heat detector would be installed. 	A60		

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A61	Continued From page 4	A61		
A61	<p>7 NMAC 8.2.61 Automatic Fire Protection (sprinkler) System</p> <p>7.8.2.61 AUTOMATIC FIRE PROTECTION (SPRINKLER) SYSTEM: Where an automatic fire protection (sprinkler) system is installed for total or partial coverage, the system shall be in accordance with NFPA 13 or NFPA 13D as applicable. [4-7-97; 7.8.2.61 NMAC - Rn, 7 NMAC 8.2.61, 8-31-00]</p> <p>This REQUIREMENT is not met as evidenced by: Surveyor: 25921 Based on observation and staff interview, the facility's practice failed to ensure the sprinkler system was maintained in accordance with NFPA 13, (Standard for the Installation, Testing and Maintenance of Water-Based Fire Protection Systems) and NFPA 25, (Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems). This deficient practice potentially affects all residents and staff throughout the facility. The licensed capacity of the facility is 100, the census during the survey was 61. The findings are:</p> <p>On October 7, 2008, between 8:30 pm and 11:30 am, During a tour of the facility with the Director of Maintenance, the Life Safety Code Surveyor observed the following:</p> <ol style="list-style-type: none"> 1. Within the Kitchen, there were eight (8) sprinkler heads with lint, dirt, and grease build up. 2. The Director of Maintenance stated that the sprinkler heads would be cleaned or replaced. 	A61		