

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>366434</b>	(X2) MULTIPLE CONSTRUCTION a. building <u>BLD 01</u> b. wing _____	(X3) DATE SURVEY COMPLETED  <b>09/26/2019</b>
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name of provider or supplier <b>NEW AVENUES - LAKEWOOD</b>	street address, city, state, zip code <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL BY FULL)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE)	(X5) COMPLETION DATE
K 0000 BLD01	INITIAL COMMENTS  POST SURVEY REVISIT  ADMINISTRATOR: Karen Knavel CERTIFIED BED CAPACITY: 8 CENSUS: 8  The following recites and new deficiency are based on the Post Survey Revisit for the Annual survey completed on 09/26/18.	K 0000		
K S351 BLD01	NFPA 101 Sprinkler System - Installation Sprinkler System - Installation Where an automatic sprinkler system is installed, for either total or partial building coverage, the system shall be in accordance with Section 9.7 and shall initiate the fire alarm system in accordance with Section 9.6, as modified below. The adequacy of the water supply shall be documented. 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, shall be permitted. Automatic sprinklers shall not be required in closets not exceeding 24 square feet and in bathrooms not exceeding 55 square feet, provided that such spaces are finished with lath and plaster or materials providing a 15-minute	K S351	K S351 483.470(j)(1)(I) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. The facility failed to ensure a sprinkler system was properly installed in accordance with Edition 2012 of NFPA 101, Life Safety Code, Section 33.2.3.5 and Edition 2010 of NFPA 13, Installation of Sprinkler Systems, Section 8.15.7.1. This had the potential to affect all eight individuals residing in the facility. Silco will install a sprinkler head in the four-foot and seven-inch wide painted wood front porch canopy and replace the sprinkler head that had plaster on it. All other NATI operated ICF homes will be checked by maintenance staff to ensure the standard is met. Compliance Date: 11/30/2019. NATI Facilities Supervisor to monitor for compliance.	11/30/2019

laboratory director's or provider/supplier representative's signature

title

(X6) date

**SAMANTHA.PAVONE**

10/21/2019

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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NAME OF PROVIDER OR SUPPLIER  <b>NEW AVENUES - LAKEWOOD</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>	
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K S351	Continued From page 1 thermal barrier. In Prompt Evacuation Capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers shall not be required in closets not exceeding 24 square feet and in bathrooms not exceeding 55 square feet, provided that such spaces are finished with lath and plaster or material providing a 15-minute thermal barrier. In Prompt Evacuation Capability facilities in buildings four or fewer stories above grade plane, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and including Four Stories in Height, shall be permitted. Initiation of the fire alarm system shall not be required for existing installations in accordance with 33.2.3.5.6. Where an automatic sprinkler is installed, attics used for living purposes, storage, or fuel-fired equipment are sprinkler protected by July 5, 2019. Attics not used for living purposes, storage, or fuel-fired equipment meet one of the following: 1. Protected by heat detection system to activate the fire alarm system according to 9.6. 2. Protected by automatic sprinkler system according to 9.7. 3. Constructed of noncombustible or	K S351		

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K S351	<p>Continued From page 2</p> <p>limited-combustible construction; or</p> <p><b>4. Constructed of fire-retardant-treated wood according to NFPA 703. 33.2.3.5.3, 33.2.3.5.3.1, 33.2.3.5.3.3, 33.2.3.5.3.4, 33.2.3.5.3.6, 33.2.3.5.7</b></p> <p>This STANDARD is not met as evidenced by:</p> <p>Based on observation and interview, the facility failed to ensure a sprinkler system was properly installed in accordance with Edition 2012 of NFPA 101, Life Safety Code, Section 33.2.3.5 and Edition 2010 of NFPA 13, Installation of Sprinkler Systems, Section 8.15.7.1. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>On 09/25/19 during a tour of the facility with the maintenance supervisor, the safety and health consultant observed the following:</p> <ol style="list-style-type: none"> <li>1. At 2:45 P.M., the four-foot and seven-inch wide painted wood front porch canopy was not sprinklered; and</li> <li>2. At 2:55 P.M., plaster was observed on the cap of the rear left sprinkler in the living room.</li> </ol> <p>Interview with the maintenance supervisor verified this finding at the time of discovery.</p> <p>System Components and Hardware -</p>	K S351		

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K S351	<p>Continued From page 3</p> <p><b>Sprinklers - Special Coatings - Painting.</b></p> <p>1. Sprinklers shall only be painted by the sprinkler manufacturer; and</p> <p>2. Where sprinklers have had paint applied by other than the sprinkler manufacturer, they shall be replaced with new listed sprinklers of the same characteristics, including orifice size, thermal response, and water distribution.</p> <p>6.2.6.2 (NFPA 13)</p> <p><b>Installation Requirements - Special Situations - Exterior Roofs, Canopies, Porte-Cocheres, Balconies, Decks, or Similar Projections.</b></p> <p>Unless the requirements of 8.15.7.2, 8.15.7.3, or 8.15.7.4 are met, sprinklers shall be installed under exterior roofs, canopies, porte-cocheres, balconies, decks, or similar projections exceeding 4 ft (1.2 m) in width.</p> <p>8.15.7.1 (NFPA 13)</p>	K S351		

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K S353 K S353 BLD01	Continued From page 4 NFPA 101 Sprinkler System - Maintenance and Testing Sprinkler System - Maintenance and Testing 2012 EXISTING (Prompt) NFPA 13 and 13R Systems All sprinkler systems installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, and NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies Up To and Including Four Stories in Height, are inspected, tested and maintained in accordance with NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection System. NFPA 13D Systems Sprinkler systems installed in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes, are inspected, tested and maintained in accordance with the following requirements of NFPA 25: 1. Control valves inspected monthly (NFPA 25, section 13.3.2). 2. Gauges inspected monthly (NFPA 25, section 13.2.71). 3. Alarm devices inspected quarterly (NFPA 25, section 5.2.6). 4. Alarm devices tested semiannually (NFPA 25, section 5.3.3). 5. Valve supervisory switches tested semiannually (NFPA 25, section 13.3.3.5). 6. Visible sprinklers inspected annually	K S353 K S353	K S353 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. Based on interview and review of the dry sprinkler gauge logs, the facility failed to ensure all dry gauges were inspected weekly in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7 and 9.7.8, and Edition 2011 of NFPA 25, Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, Sections 4.3, 5.2, 13.4 and 13.7. This had the potential to affect all eight individuals residing in the facility. Maintenance staff will receive documented training on standard 5.2.4.2 (NFPA 25). The gauges on the dry sprinkler system were checked 9/25/19; they will be checked weekly and documented for review. The records shall indicate the procedure performed (e.g., inspection, test, or maintenance), the organization that performed the work, the results, and the date. The phone line cord will be rerouted on 10/15/2019 so not to interfere with the sprinkler line. Meeting with Silco 10/15/2019 to discuss the hydraulic design information sign for hydraulically designed systems shall be inspected quarterly to verify that it is attached securely to the sprinkler riser and is legible new sign will be attached by 11/30/19. The landscape was cleaned up on 10/09/19 and will be maintained by maintenance staff regularly. Dry pipe systems shall be tested once every 3 years for air	11/30/2019

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K S353	<p>Continued From page 5</p> <p>((NFPA 25, section 5.2.1).          7. Visible pipe inspected annually (NFPA 25, section 5.2.2).          8. Visible pipe hangers inspected annually (NFPA 25, section 5.2.3).          9. Buildings inspected annually prior to freezing weather for adequate heat for water filled piping (NFPA 25, section 5.2.5).          10. A representative sample of fast response sprinklers are tested at 20 years (NFPA 25, section 5.3.1.1.1.2).          11. A representative sample of dry pendant sprinklers are tested at 10 years (NFPA 25, section 5.3.1.1.15).          12. Antifreeze solutions are tested annually (NFPA 25, section 5.3.4).          13. Control valves are operated through their full range and returned to normal annually (NFPA 25, section 13.3.3.1).          14. Operating stems of OS&amp;Y valves are lubricated annually (NFPA 25, section 13.3.4).          15. Dry pipe systems extending into unheated portions of the building are inspected, tested and maintained (NFPA 25, section 13.4.4).          A. Date sprinkler system last checked and necessary maintenance provided.          _____          B. Show who provided the service.          _____          C. Note the source of the water supply for the automatic sprinkler system.          _____          (Provide in REMARKS information on</p>	K S353	<p>leakage and documented. To monitor: The Facility Supervisor will monitor the documentation monthly for the 1st 90 days then quarterly there after to assure compliance with the regulation. Compliance Date 11/30/2019. NATI Facilities Manager to monitor for compliance.</p>	

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K S353	<p>Continued From page 6</p> <p>coverage for any non-required or partial automatic sprinkler system.)            33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7, 9.7.8, and NFPA 25            This STANDARD is not met as evidenced by:            Based on interview and review of the the dry sprinkler gauge logs, the facility failed to ensure all dry gauges were inspected weekly in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7 and 9.7.8, and Edition 2011 of NFPA 25, Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, Sections 4.3, 5.2, 13.4 and 13.7. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>A. On 09/25/19, during a review of the facility's life safety code documents with the maintenance supervisor, and upon request of the safety and health consultant:</p> <p>1. At 4:33 P.M., the facility failed to provide records of weekly inspection of the dry system gauges. Furthermore, according to interview with the maintenance supervisor, the gauges are currently only inspected a bi-weekly basis and the records were not available on-site; and</p> <p>2. At 5:02 P.M., the facility failed to provide a record of a dry pipe sprinkler</p>	K S353		

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K S353	<p>Continued From page 7</p> <p>system air leakage test performed within the previous three years; and</p> <p>B. On 09/25/19 during a tour of the facility with the maintenance supervisor, the safety and health consultant observed the following:</p> <ol style="list-style-type: none"> <li>1. At 3:37 P.M., a telephone wire was was hung from the basement sprinkler pipe;</li> <li>2. At 3:45 P.M., a hydraulic design information sign was not attached to the sprinkler riser; and</li> <li>3. At 4:55 P.M., access and view of the fire department connection was blocked by landscaping.</li> </ol> <p>Interview with the maintenance supervisor verified the above findings at the time of discovery.</p> <p>This deficiency is a recite to the 09/26/18 Annual survey.</p> <p>Records shall be maintained in accordance with Section 4.3. 13.2.8 (NFPA 25)</p> <p>Records. Records shall be made for all inspections, tests, and maintenance of the system and its components and shall be made available to the authority having jurisdiction upon request. The records shall indicate the procedure performed (e.g., inspection, test, or maintenance), the organization that performed the work, the results, and</p>	K S353		

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K S353	<p>Continued From page 8</p> <p>the date. Finally, the records shall be maintained by the property owner. 4.3 (NFPA 25)</p> <p>Pipe and Fittings. Sprinkler piping shall not be subjected to external loads by materials either resting on the pipe or hung from the pipe. 5.2.2.2 (NFPA 25)</p> <p>Gauges. Gauges on dry, preaction, and deluge systems shall be inspected weekly to ensure that normal air and water pressures are being maintained. 5.2.4.2 (NFPA 25)</p> <p>Hydraulic Design Information Sign. The hydraulic design information sign for hydraulically designed systems shall be inspected quarterly to verify that it is attached securely to the sprinkler riser and is legible. 5.2.6 (NFPA 25)</p> <p>System Valves - Dry Pipe Valves/Quick-Opening Devices - Testing. Dry pipe systems shall be tested once every 3 years for air leakage, using one of the following test methods: (1) A pressure test at 40 psi (3.2 bar) shall be performed for 2 hours. (a) The system shall be permitted to lose up to 3 psi (0.2 bar) during the duration of the test. (b) Air leaks shall be addressed if the</p>	K S353		

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K S353	<p>Continued From page 9</p> <p>system loses more than 3 psi (0.2 bar) during this test.</p> <p>(2) With the system at normal system pressure, the air source (compressor or shop air) shall be shut off for 4 hours. If the low air pressure alarm goes off within this period, the air leaks shall be addressed.</p> <p>13.4.4.2.9 (NFPA 25)</p> <p>Fire Department Connections.</p> <p>Fire department connections shall be inspected quarterly to verify the fire department connections are visible and accessible.</p> <p>13.7.1(1) (NFPA 25)</p>	K S353		

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K S761 K S761 BLD01	Continued From page 10 Maintenance, Inspection and Testing - Doors Maintenance, Inspection & Testing - Doors Door assemblies where the door leaf is required to swing in the direction of egress travel are inspected and tested annually per 7.2.1.15. Fire door assemblies are inspected and tested in accordance with NFPA 80, Standard for Fire Doors and Other Opening Protectives. Smoke door assemblies are inspected and tested in accordance with NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives. Door assemblies are visually inspected on both sides and the requirements under 7.2.1.15.7 are verified. Individuals performing the door inspection and testing have an understanding of the operating components of the doors. Written records of inspection and testing are maintained and are available for review. 33.7.7, 7.2.1.15 (LSC) 5.2. 5.2.3 (NFPA 80) 5.2.1 (NFPA 105) This STANDARD is not met as evidenced by:  Based on record review and interview, the facility failed to ensure an inspection of door openings were performed annually in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.7.7 and 7.2.1.15, Edition 2010 of NFPA 80, Fire Doors and Other Opening Protectives,	K S761 K S761	K S761 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. Based on record review and interview, the facility failed to ensure an inspection of door openings were performed annually in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.7.7 and 7.2.1.15, Edition 2010 of NFPA 80, Fire Doors and Other Opening Protectives, Section 5.2, and 2010 of NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives, Section 5.2.1. This had the potential to affect all eight individuals residing in the facility. Maintenance staff to receive documented training on the procedures for performing annual inspections of fire door openings. The fire door openings were inspected 9/25/2019; they will be checked monthly with preventative maintenance schedule and annually and documented for review. This also applies to all other NATI operated ICF homes to ensure the standard is met. Compliance Date 11.30.2019 NATI Facilities Supervisor to monitor for compliance.	11/30/2019

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K S761	<p>Continued From page 11</p> <p>Section 5.2, and 2010 of NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives, Section 5.2.1. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>On 09/25/19 at 5:14 P.M., during a review of the facility's life safety code documents with the maintenance supervisor, and upon request of the safety and health consultant, the facility failed to provide evidence of annual inspection of fire door openings to include test results for each item specified in section 5.2.4 of NFPA 80, which must be verified for each door assembly. Interview with the maintenance supervisor verified this finding at the time of the discovery.</p> <p>This deficiency is a recite to the 09/26/18 Annual survey.</p> <p>Care and Maintenance - Inspections - Functional Testing. Functional testing of fire door and window assemblies shall be performed by individuals with knowledge and understanding of the operating components of the type of door being subject to testing. 5.2.3.1 (NFPA 80)</p> <p>Care and Maintenance - Inspections - Swinging Doors with Builders Hardware or</p>	K S761			

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K S761	<p>Continued From page 12</p> <p><b>Fire Door Hardware.</b>          As a minimum, the following items shall be verified:</p> <p>(1) No open holes or breaks exist in surfaces of either the door or frame.          (2) Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped.          (3) The door, frame, hinges, hardware, and noncombustible threshold are secured, aligned, and in working order with no visible signs of damage.          (4) No parts are missing or broken.          (5) Door clearances do not exceed clearances listed in 4.8.4 and 6.3.1.7.          (6) The self-closing device is operational; that is, the active door completely closes when operated from the full open position.          (7) If a coordinator is installed, the inactive leaf closes before the active leaf.          (8) Latching hardware operates and secures the door when it is in the closed position.          (9) Auxillary hardware items that interfere or prohibit operation are not installed on the door or frame.          (10) No field modifications to the door assembly have been performed that void the label.          (11) Gasketing and edge seals, where required, are inspected to verify their presence and integrity.</p> <p>5.2.4 (NFPA 80)</p> <p>A written record shall be maintained and shall be made available to the authority</p>	K S761		

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name of provider or supplier <b>NEW AVENUES - LAKEWOOD</b>		street address, city, state, zip code <b>1927 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>		
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K S761	<p>Continued From page 13          having jurisdiction (AHJ).          5.2.14.3.2 (NFPA 80)</p> <p>Specific Requirements - Inspections.</p> <ol style="list-style-type: none"> <li>1. Smoke door assemblies shall be inspected annually;</li> <li>2. Doors shall be operated to confirm full closure;</li> <li>3. Hardware and gaskets shall be inspected annually, and any parts found to be damaged or inoperative shall be replaced;</li> <li>4. Tin clad and Kalamein doors shall be inspected regularly for dry rot;</li> <li>5. A written record shall be maintained and shall be made available to the authority having jurisdiction; and</li> <li>6. Records shall be maintained for not less than 3 years.</li> </ol> <p>5.2.1 (NFPA 105)</p>	K S761		

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K 0000  BLD01	<p><b>INITIAL COMMENTS</b></p> <p><b>FIRE SAFETY SURVEY REPORT 2012 ICF/ IID CODE EXISTING</b></p> <p><b>ADMINISTRATOR: Karen Knavel CERTIFIED BED CAPACITY: 8 CENSUS: 8</b></p> <p><b>SLOW</b></p> <p><b>BUILDING 1 OF 1</b></p> <p><b>42 CFR .470 (j)</b></p> <p><b>The facility must meet the applicable provisions of the 2012 Existing edition of the Life Safety Code (LSC) of the National Fire Protection Association (NFPA).</b></p> <p><b>The following deficiencies are based on the Annual survey completed 09/25/19.</b></p>	K 0000		

laboratory director's or provider/supplier representative's signature

title

**SAMANTHA.PAVONE**

(X6) DATE  
**10/22/2019**

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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name of provider or supplier <b>NEW AVENUES - LAKEWOOD</b>	street address, city, state, zip code <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>
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K S228 K S228 BLD01	<p>Continued From page 1</p> <p><b>NFPA 101 Stairways and Smokeproof Enclosures</b>  <b>Stairways and Smokeproof Enclosures 2012 EXISTING (Slow)</b>                      In Slow Evacuation Capability facilities, stair enclosures shall not be required in buildings of three or fewer stories protected throughout by an approved automatic sprinkler system in accordance with 33.2.3.5 that uses quick response or residential sprinklers. This exception shall be permitted only if a primary means of escape from each sleeping area still exists that does not pass through a portion of a lower floor, unless that route is separated from all spaces on that floor by construction having a 1/2-hour fire resistance rating.</p> <p>In Slow Evacuation Capability facilities, of three or fewer stories protected by an approved automatic sprinkler system in accordance with 33.2.3.5, stairs shall be permitted to be open at the topmost story only. The entire primary means of escape of which the stairs are a part shall be separated from all portions of lower stories. 33.2.2.4.6, 33.2.2.4.9</p> <p>This STANDARD is not met as evidenced by:                      Based on observation and interview, the facility failed to ensure interior stairs used as a primary means of escape were enclosed with fire barriers in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.2.4 and 8.3.3.1, and Edition 2010 of NFPA 80, Standard for Fire</p>	K S228 K S228	<p><b>K S228 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD</b> It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. The facility failed to ensure interior stairs used as a primary means of escape were enclosed with fire barriers in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.2.4 and 8.3.3.1, and Edition 2010 of NFPA 80, Standard for Fire Doors and Other Opening Protectives, Section 5.1.5.2. This had the potential to affect all eight individuals residing in the facility. Silco will refit the home with combination smoke/fire rated dampers. Maintenance staff to ensure that the FRR on the 1st floor bathroom and bedroom doors will be in compliance with rules and regulations. The cord was removed and the hole was patched up on 10/9/2019. Compliance Date: 11/30/2019. NATI Facilities Supervisor to monitor for compliance.</p>	11/30/2019

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K S228	<p>Continued From page 2</p> <p>Doors and Other Opening Protectives, Section 5.1.5.2. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>On 09/25/19, during a tour of the facility with the maintenance supervisor, the safety and health consultant observed the following:</p> <ol style="list-style-type: none"> <li>1. At 3:36 P.M., an unsealed hole penetrated by a blue communication wire in the basement level of the southwest stairwell wall communicated with the main section of the basement;</li> <li>2. At 3:52 P.M., a transfer grill in the wall of the laundry room allowed a direct path for smoke to the basement level of the southwest stairwell, which was open to the first and second floor. Specifically, the transfer grill in the laundry room wall and the communicating transfer grill in the corridor wall were both fitted with fire dampers; however, neither of the grills were provided with a smoke damper to restrict the movement of smoke;</li> <li>3. At 4:12 P.M., the first floor 1.5-hour fire-resistant-rated (FRR) door separating the escape route from the bathroom was not provided with a self-closing device; and</li> <li>4. At 4:16 P.M., the first floor 1.5-hour FRR doors separating the bedroom and the bathroom from the escape route were not provided with fire-rated hardware.</li> </ol>	K S228		

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K S228	<p>Continued From page 3</p> <p>Interview with the maintenance supervisor verified the above findings at the time of discovery.</p> <p><b>Definitions - General Definitions - Fire Barrier.</b>            A continuous membrane or a membrane with discontinuities created by protected openings with a specified fire protection rating, where such membrane is designed and constructed with a specified fire resistance rating to limit the spread of fire, that also restricts the movement of smoke.            3.3.31.1</p> <p><b>Fire Doors and Windows.</b>            Openings required to have a fire protection rating by Table 8.3.4.2 shall be protected by approved, listed, labeled fire door assemblies and fire window assemblies and their accompanying hardware, including all frames, closing devices, anchorage, and sills in accordance with the requirements of NFPA 80, Standard for Fire Doors and Other Opening Protectives, except as otherwise specified in this Code.            8.3.3.1</p> <p><b>Repairs and Field Modifications - Field Modifications.</b>            1. In cases where a field modification to a fire door or a fire door assembly is desired, the laboratory with which the product or component being modified is listed shall be contacted and a description of the</p>	K S228		

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K S228	Continued From page 4 modifications shall be presented to that laboratory. 2. If the laboratory finds that the modifications will not compromise the integrity and fire resistance capabilities of the assembly, the modifications shall be permitted to be authorized by the laboratory without a field visit from the laboratory. 5.1.5.2 (NFPA 80)	K S228		

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K S353 K S353 BLD01	Continued From page 5 NFPA 101 Sprinkler System - Maintenance and Testing Sprinkler System - Maintenance and Testing 2012 EXISTING (Prompt) NFPA 13 and 13R Systems All sprinkler systems installed in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, and NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies Up To and Including Four Stories in Height, are inspected, tested and maintained in accordance with NFPA 25, Standard for Inspection, Testing and Maintenance of Water Based Fire Protection System. NFPA 13D Systems Sprinkler systems installed in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One- and Two-Family Dwellings and Manufactured Homes, are inspected, tested and maintained in accordance with the following requirements of NFPA 25: 1. Control valves inspected monthly (NFPA 25, section 13.3.2). 2. Gauges inspected monthly (NFPA 25, section 13.2.71). 3. Alarm devices inspected quarterly (NFPA 25, section 5.2.6). 4. Alarm devices tested semiannually (NFPA 25, section 5.3.3). 5. Valve supervisory switches tested semiannually (NFPA 25, section 13.3.3.5). 6. Visible sprinklers inspected annually	K S353 K S353	K S353 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. Based on interview and review of the dry sprinkler gauge logs, the facility failed to ensure all dry gauges were inspected weekly in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7 and 9.7.8, and Edition 2011 of NFPA 25, Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, Sections 4.3, 5.2, 13.4 and 13.7. This had the potential to affect all eight individuals residing in the facility. Maintenance staff will receive documented training on standard 5.2.4.2 (NFPA 25). The gauges on the dry sprinkler system were checked 9/25/19; they will be checked weekly and documented for review. The records shall indicate the procedure performed (e.g., inspection, test, or maintenance), the organization that performed the work, the results, and the date. Air leakage test of dry system will be performed by Silco by 11/30/19. The phone line cord will be rerouted on 10/28/2019 so not to interfere with the sprinkler line. Meeting with Silco 10/15/2019 to discuss the hydraulic design information sign for hydraulically designed systems shall be inspected quarterly to verify that it is attached securely to the sprinkler riser and is legible. Access and view of the fire department connection was cleared and a reflective FDC sign was posted on 10/9/2019. To monitor: The	11/30/2019

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K S353	<p>Continued From page 6</p> <p>((NFPA 25, section 5.2.1).</p> <p>7. Visible pipe inspected annually (NFPA 25, section 5.2.2).</p> <p>8. Visible pipe hangers inspected annually (NFPA 25, section 5.2.3).</p> <p>9. Buildings inspected annually prior to freezing weather for adequate heat for water filled piping (NFPA 25, section 5.2.5).</p> <p>10. A representative sample of fast response sprinklers are tested at 20 years (NFPA 25, section 5.3.1.1.1.2).</p> <p>11. A representative sample of dry pendant sprinklers are tested at 10 years (NFPA 25, section 5.3.1.1.15).</p> <p>12. Antifreeze solutions are tested annually (NFPA 25, section 5.3.4).</p> <p>13. Control valves are operated through their full range and returned to normal annually (NFPA 25, section 13.3.3.1).</p> <p>14. Operating stems of OS&amp;Y valves are lubricated annually (NFPA 25, section 13.3.4).</p> <p>15. Dry pipe systems extending into unheated portions of the building are inspected, tested and maintained (NFPA 25, section 13.4.4).</p> <p>A. Date sprinkler system last checked and necessary maintenance provided.</p> <p>_____</p> <p>B. Show who provided the service.</p> <p>_____</p> <p>C. Note the source of the water supply for the automatic sprinkler system.</p> <p>_____</p> <p>(Provide in REMARKS information on</p>	K S353	<p>Facility Supervisor will monitor the documentation monthly for the 1st 90 days then quarterly thereafter to assure compliance with the regulation. Compliance Date 11/30/2019. NATI Facilities Manager to monitor for compliance.</p>	

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K S353	<p>Continued From page 7</p> <p>coverage for any non-required or partial automatic sprinkler system.)            33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7, 9.7.8, and NFPA 25</p> <p>This STANDARD is not met as evidenced by:            Based on interview and review of the the dry sprinkler gauge logs, the facility failed to ensure all dry gauges were inspected weekly in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.3.5.3, 33.2.3.5.8, 9.7.5, 9.7.7 and 9.7.8, and Edition 2011 of NFPA 25, Inspection, Testing, and Maintenance of Water-Based Fire Protection Systems, Sections 4.3, 5.2, 13.4 and 13.7. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>A. On 09/25/19, during a review of the facility's life safety code documents with the maintenance supervisor, and upon request of the safety and health consultant:</p> <p>1. At 4:33 P.M., the facility failed to provide records of weekly inspection of the dry system gauges. Furthermore, according to interview with the maintenance supervisor, the gauges are currently only inspected a bi-weekly basis and the records were not available on-site; and</p> <p>2. At 5:02 P.M., the facility failed to provide a record of a dry pipe sprinkler</p>	K S353		
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K S353	<p>Continued From page 8</p> <p>system air leakage test performed within the previous three years; and</p> <p>B. On 09/25/19 during a tour of the facility with the maintenance supervisor, the safety and health consultant observed the following:</p> <ol style="list-style-type: none"> <li>1. At 3:37 P.M., a telephone wire was hung from the basement sprinkler pipe;</li> <li>2. At 3:45 P.M., a hydraulic design information sign was not attached to the sprinkler riser; and</li> <li>3. At 4:55 P.M., access and view of the fire department connection was blocked by landscaping.</li> </ol> <p>Interview with the maintenance supervisor verified the above findings at the time of discovery.</p> <p>This deficiency is a recite to the 09/26/18 Annual survey.</p> <p>Records shall be maintained in accordance with Section 4.3.13.2.8 (NFPA 25)</p> <p>Records.                  Records shall be made for all inspections, tests, and maintenance of the system and its components and shall be made available to the authority having jurisdiction upon request. The records shall indicate the procedure performed (e.g., inspection, test, or maintenance), the organization</p>	K S353		

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K S353	<p>Continued From page 9</p> <p>that performed the work, the results, and the date. Finally, the records shall be maintained by the property owner.            4.3 (NFPA 25)</p> <p>Pipe and Fittings.            Sprinkler piping shall not be subjected to external loads by materials either resting on the pipe or hung from the pipe.            5.2.2.2 (NFPA 25)</p> <p>Gauges.            Gauges on dry, preaction, and deluge systems shall be inspected weekly to ensure that normal air and water pressures are being maintained.            5.2.4.2 (NFPA 25)</p> <p>Hydraulic Design Information Sign.            The hydraulic design information sign for hydraulically designed systems shall be inspected quarterly to verify that it is attached securely to the sprinkler riser and is legible.            5.2.6 (NFPA 25)</p> <p>System Valves - Dry Pipe Valves/Quick-Opening Devices - Testing.            Dry pipe systems shall be tested once every 3 years for air leakage, using one of the following test methods:            (1) A pressure test at 40 psi (3.2 bar) shall be performed for 2 hours.            (a) The system shall be permitted to lose up to 3 psi (0.2 bar) during the duration of the test.</p>	K S353		

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K S353	Continued From page 10  (b) Air leaks shall be addressed if the system loses more than 3 psi (0.2 bar) during this test. (2) With the system at normal system pressure, the air source (compressor or shop air) shall be shut off for 4 hours. If the low air pressure alarm goes off within this period, the air leaks shall be addressed. 13.4.4.2.8 (NFPA 25)  Fire Department Connections. Fire department connections shall be inspected quarterly to verify the fire department connections are visible and accessible. 13.7.1(1) (NFPA 25)	K S353		

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K S358 K S358 BLD01	<p>Continued From page 11</p> <p><b>NFPA 101 Sprinkler System - Installation Sprinkler System - Installation 2012 EXISTING (Slow)</b></p> <p>In Slow Evacuation Capability facilities where an automatic sprinkler system is installed, for either total or partial building coverage, the system shall be in accordance with Section 9.7 and shall initiate the fire alarm system in accordance with 9.6, as modified below. The adequacy of the water supply shall be documented.</p> <p>In Slow 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, shall be permitted. Automatic sprinklers shall not be required in closets not exceeding 24 square feet and in bathrooms not exceeding 55 square feet, provided that such spaces are finished with lath and plaster or materials providing a 15-minute thermal barrier.</p> <p>In Slow Evacuation Capability facilities, where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers shall not be required in closets not exceeding 24 square feet and in bathrooms not exceeding 55 square feet, provided that such spaces are finished with lath and plaster or material providing a 15-minute thermal barrier.</p> <p>In Slow Evacuation Capability facilities, in buildings four or fewer stories above grade</p>	K S358 K S358	<p><b>K S358 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD</b> It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. The facility failed to ensure a sprinkler system was properly installed in accordance with Edition 2012 of NFPA 101, Life Safety Code, Section 33.2.3.5 and Edition 2010 of NFPA 13, Installation of Sprinkler Systems, Section 8.15.7.1. This had the potential to affect all eight individuals residing in the facility. Silco will install a sprinkler head in the four-foot and seven-inch wide painted wood front porch canopy and replace the sprinkler head that had plaster on it. All other NATI operated ICF homes will be checked by maintenance staff to ensure the standard is met. Compliance Date: 11/30/2019. NATI Facilities Supervisor to monitor for compliance.</p>	11/30/2019

STATEMENT OF DEFICIENCIES		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: <b>366434</b>	(X2) MULTIPLE CONSTRUCTION a. building <u>BLD 01</u> b. wing _____	(X3) DATE SURVEY COMPLETED <b>09/25/2019</b>
NAME OF PROVIDER OR SUPPLIER <b>NEW AVENUES - LAKEWOOD</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1827 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL BY FULL)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE)	(X5) COMPLETION
K S358	<p>Continued From page 12</p> <p>plane, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and including Four Stories in Height, shall be permitted. Initiation of the fire alarm system shall not be required for existing installations in accordance with 33.2.3.5.6.</p> <p>Where an automatic sprinkler is installed, attics used for living purposes, storage, or fuel-fired equipment are sprinkler protected. Attics not used for living purposes, storage, or fuel-fired equipment meet one of the following:</p> <ol style="list-style-type: none"> <li>1. Protected by heat detection system to activate the fire alarm system according to 9.6.</li> <li>2. Protected by automatic sprinkler system according to 9.7.</li> <li>3. Constructed of noncombustible or limited-combustible construction; or</li> <li>4. Constructed of fire-retardant-treated wood according to NFPA 703. 33.2.3.5.3, 33.2.3.5.3.2 through 33.2.3.5.3.4, 33.2.3.5.3.6</li> </ol> <p>This STANDARD is not met as evidenced by:</p> <p>Based on observation and interview, the facility failed to ensure a sprinkler system was properly installed in accordance with Edition 2012 of NFPA 101, Life Safety Code, Section 33.2.3.5 and Edition 2010 of NFPA 13, Installation of Sprinkler Systems, Section 8.15.7.1. This had the potential to affect all eight individuals</p>	K S358		

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NAME OF PROVIDER OR SUPPLIER <b>NEW AVENUES - LAKEWOOD</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL BY FULL)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE)	(X5) COMPLETION
K S358	<p>Continued From page 13 residing in the facility.</p> <p>Findings include:</p> <p>On 09/25/19 during a tour of the facility with the maintenance supervisor, the safety and health consultant observed the following:</p> <p>1. At 2:45 P.M., the four-foot and seven-inch wide painted wood front porch canopy was not sprinklered; and</p> <p>2. At 2:55 P.M., plaster was observed on the cap of the rear left sprinkler in the living room.</p> <p>Interview with the maintenance supervisor verified this finding at the time of discovery.</p> <p>System Components and Hardware - Sprinklers - Special Coatings - Painting.</p> <p>1. Sprinklers shall only be painted by the sprinkler manufacturer; and</p> <p>2. Where sprinklers have had paint applied by other than the sprinkler manufacturer, they shall be replaced with new listed sprinklers of the same characteristics, including orifice size, thermal response, and water distribution.</p> <p>6.2.6.2 (NFPA 13)</p> <p>Installation Requirements - Special Situations - Exterior Roofs, Canopies, Porte-Cocheres, Balconies, Decks, or Similar Projections.</p> <p>Unless the requirements of 8.15.7.2,</p>	K S358		

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NAME OF PROVIDER OR SUPPLIER <b>NEW AVENUES - LAKEWOOD</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>	
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K S358	Continued From page 14 8.15.7.3, or 8.15.7.4 are met, sprinklers shall be installed under exterior roofs, canopies, porte-cocheres, balconies, decks, or similar projections exceeding 4 ft (1.2 m) in width. 8.15.7.1 (NFPA 13)	K S358		
K S511 BLD01	NFPA 101 Utilities - Gas and Electric Utilities - Gas and Electric Equipment using gas or related gas piping complies with NFPA 54, National Fuel Gas Code, electrical wiring and equipment complies with NFPA 70, National Electric Code. 32.2.5.1, 33.2.5.1, 9.1.1, 9.1.2 This STANDARD is not met as evidenced by: Based on observation and interview, the facility failed to ensure power strips are used in accordance with Edition 2012 of NFPA 101, Life Safety Code, Section 33.2.5.1, 9.1.1 and 9.1.2, and Edition 2011 of NFPA 70, National Electrical Code, Section 400.8. This had the potential to affect all eight individuals residing in the facility.  Findings include:  On 09/26/19 at 3:56 P.M., during a tour of the facility with the maintenance supervisor, the safety and health consultant observed a flexible electrical power cord permanently run through a hole in the laundry suite outside wall. This power cord was traced to solid metal	K S511	K S511 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. The facility failed to ensure power strips are used in accordance with Edition 2012 of NFPA 101, Life Safety Code, Section 33.2.5.1, 9.1.1 and 9.1.2, and Edition 2011 of NFPA 70, National Electrical Code, Section 400.8. This had the potential to affect all eight individuals residing in the facility. The power strip was disconnected and taken out the hole was plugged with caulking that is in compliance with rules and regulations on 10/09/2019. Compliance Date: 11/30/2019. NATI Facilities Supervisor to monitor for compliance.	11/30/2019

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name of provider or supplier <b>NEW AVENUES - LAKEWOOD</b>		street address, city, state, zip code <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>		
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K S511	<p>Continued From page 15</p> <p>conduit on the exterior of the building; however, no further destination of the cord was determined. Interview with the maintenance supervisor verified this finding at the time of discovery.</p> <p>Uses Not Permitted. Unless specifically permitted in 400.7, flexible cords and cables shall not be used for the following:</p> <ul style="list-style-type: none"> <li>(1) As a substitute for the fixed wiring of a structure</li> <li>(2) Where run through holes in walls, structural ceilings, suspended ceilings, dropped ceilings, or floors</li> <li>(3) Where run through doorways, windows, or similar openings</li> <li>(4) Where attached to building surfaces</li> </ul> <p>Exception to (4): Flexible cord and cable shall be permitted to be attached to building surfaces in accordance with the provisions of 368.56(B)</p> <ul style="list-style-type: none"> <li>(5) Where concealed by walls, floors, or ceilings or located above suspended or dropped ceilings</li> <li>(6) Where installed in raceways, except as otherwise permitted in this Code</li> <li>(7) Where subject to physical damage</li> </ul> <p>400.8 (NFPA 70)</p>	K S511		

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NAME OF PROVIDER OR SUPPLIER  <b>NEW AVENUES - LAKEWOOD</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL BY FULL)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE)	(X5) COMPLETION DATE
K S521 K S521 BLD01	<p>Continued From page 16</p> <p>NFPA 101 HVAC HVAC Heating, ventilation, and air-conditioning equipment comply with 9.2.1 and 9.2.2, except as otherwise permitted by Chapter 33. 32.2.5.2.1, 33.2.5.2.1 This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure fire dampers were tested and inspected every four years in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.5.2.1 and 9.2.1, Edition 2012 of NFPA 90A, Installation of Air-Conditioning and Ventilating Systems, section 5.4.7.1 and Edition 2010 of NFPA 80, Fire Doors and Other Opening Protectives, Section 19.4.1. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>On 09/25/19 at 5:19 P.M., during a review of the life safety code documents with the maintenance supervisor, and upon request of the safety and health consultant, the facility failed to provide records of testing of the fire dampers located in the laundry room and basement level of the southwest stairwell. Interview with the maintenance supervisor verified this finding at the time of discovery.</p> <p>HVAC</p>	K S521 K S521	<p>K S521 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. The facility failed to ensure fire dampers were tested and inspected every four years in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.2.5.2.1 and 9.2.1, Edition 2012 of NFPA 90A, Installation of Air-Conditioning and Ventilating Systems, section 5.4.7.1 and Edition 2010 of NFPA 80, Fire Doors and Other Opening Protectives, Section 19.4.1. This had the potential to affect all eight individuals residing in the facility. Maintenance staff will receive documented training on standard 5.2.4.2 (NFPA 25). Silco will refit the home with self-sealing fire damper covers. The records shall indicate the procedure performed (e.g., inspection, test, or maintenance), the organization that performed the work, the results, and the date. The Facility Supervisor will monitor the documentation monthly for the 1st 90 days then quarterly thereafter to assure compliance with the regulation. Compliance Date 11/30/2019. NATI Facilities Supervisor to monitor for compliance.</p>	11/30/2019

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K S521	<p>Continued From page 17</p> <p>Heating, ventilation, and air-conditioning equipment comply with 9.2.1 and 9.2.2, except as otherwise permitted by Chapter 33. 33.2.5.2.1</p> <p>Heating, Ventilating, and Air-Conditioning. Air-Conditioning, Heating, Ventilating Ductwork, and Related Equipment. Air-conditioning, heating, ventilating ductwork, and related equipment shall be in accordance with NFPA 90A, Standard for the Installation of Air-Conditioning and Ventilating Systems, or NFPA 90B, Standard for the Installation of Warm Air Heating and Air-Conditioning Systems, as applicable, unless such installations are approved existing installations, which shall be permitted to be continued in service. 9.2.1</p> <p>Fire Dampers, Smoke Dampers, and Ceiling Dampers - Installation. Fire dampers, including their sleeves; smoke dampers; and ceiling dampers shall be installed in accordance with the conditions of their listings and the manufacturer's installation instructions and the requirements of NFPA 80, Standard for Fire Doors and Other Opening Protectives. 5.4.7.1 (NFPA 90A)</p> <p>Installation, Testing, and Maintenance of Fire Dampers - Periodic Inspection and Testing. Each damper shall be tested and</p>	K S521		

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K S521	Continued From page 18 inspected 1 year after installation and the test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years. 19.4.1 (NFPA 80)	K S521		
K S761 BLD01	Maintenance, Inspection and Testing - Doors Maintenance, Inspection & Testing - Doors Door assemblies where the door leaf is required to swing in the direction of egress travel are inspected and tested annually per 7.2.1.15. Fire door assemblies are inspected and tested in accordance with NFPA 80, Standard for Fire Doors and Other Opening Protectives. Smoke door assemblies are inspected and tested in accordance with NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives. Door assemblies are visually inspected on both sides and the requirements under 7.2.1.15.7 are verified. Individuals performing the door inspection and testing have an understanding of the operating components of the doors. Written records of inspection and testing are maintained and are available for review. 33.7.7, 7.2.1.15 (LSC) 5.2. 5.2.3 (NFPA 80) 5.2.1 (NFPA 105) This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure an inspection of	K S761	K S761 483.470(j)(1)(i) LIFE SAFETY CODE STANDARD It is the practice and policy of NATI to ensure the safety of each individual at all times by providing a facility that is safe including during an unexpected emergency situation. Based on record review and interview, the facility failed to ensure an inspection of door openings were performed annually in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.7.7 and 7.2.1.15, Edition 2010 of NFPA 80, Fire Doors and Other Opening Protectives, Section 5.2, and 2010 of NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives, Section 5.2.1. This had the potential to affect all eight individuals residing in the facility. Maintenance staff to receive documented training on the procedures for performing annual inspections of fire door openings. The fire door openings were inspected 9/25/2019; they will be checked monthly with preventative maintenance schedule and annually and documented for review. This also applies to all other NATI operated ICF homes to ensure the standard is met. Compliance Date 11/30/2019 NATI Facilities Supervisor to monitor for compliance.	11/30/2019

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NAME OF PROVIDER OR SUPPLIER  NEW AVENUES - LAKEWOOD		STREET ADDRESS, CITY, STATE, ZIP CODE 1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107		
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K S761	<p>Continued From page 19</p> <p>door openings were performed annually in accordance with Edition 2012 of NFPA 101, Life Safety Code, Sections 33.7.7 and 7.2.1.15, Edition 2010 of NFPA 80, Fire Doors and Other Opening Protectives, Section 5.2, and 2010 of NFPA 105, Standard for Smoke Door Assemblies and Other Opening Protectives, Section 5.2.1. This had the potential to affect all eight individuals residing in the facility.</p> <p>Findings include:</p> <p>On 09/25/19 at 5:14 P.M., during a review of the facility's life safety code documents with the maintenance supervisor, and upon request of the safety and health consultant, the facility failed to provide evidence of annual inspection of fire door openings to include test results for each item specified in section 5.2.4 of NFPA 80, which must be verified for each door assembly. Interview with the maintenance supervisor verified this finding at the time of the discovery.</p> <p>This deficiency is a recite to the 09/26/18 Annual survey.</p> <p>Care and Maintenance - Inspections - Functional Testing.          Functional testing of fire door and window assemblies shall be performed by individuals with knowledge and understanding of the operating components of the type of door being</p>	K S761		

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name of provider or supplier <b>NEW AVENUES - LAKEWOOD</b>	street address, city, state, zip code <b>1527 WEST CLIFTON BOULEVARD LAKEWOOD OH, 44107</b>
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K S761	<p>Continued From page 20            subject to testing.            5.2.3.1 (NFPA 80)</p> <p>Care and Maintenance - Inspections - Swinging Doors with Builders Hardware or Fire Door Hardware.            As a minimum, the following items shall be verified:</p> <p>(1) No open holes or breaks exist in surfaces of either the door or frame.            (2) Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped.            (3) The door, frame, hinges, hardware, and noncombustible threshold are secured, aligned, and in working order with no visible signs of damage.            (4) No parts are missing or broken.            (5) Door clearances do not exceed clearances listed in 4.8.4 and 6.3.1.7.            (6) The self-closing device is operational; that is, the active door completely closes when operated from the full open position.            (7) If a coordinator is installed, the inactive leaf closes before the active leaf.            (8) Latching hardware operates and secures the door when it is in the closed position.            (9) Auxiliary hardware items that interfere or prohibit operation are not installed on the door or frame.            (10) No field modifications to the door assembly have been performed that void the label.            (11) Gasketing and edge seals, where required, are inspected to verify their</p>	K S761		

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K S761	<p>Continued From page 21          presence and integrity.          5.2.4 (NFPA 80)</p> <p>A written record shall be maintained and shall be made available to the authority having jurisdiction (AHJ).          5.2.14.3.2 (NFPA 80)</p> <p>Specific Requirements - Inspections.</p> <ol style="list-style-type: none"> <li>1. Smoke door assemblies shall be inspected annually;</li> <li>2. Doors shall be operated to confirm full closure;</li> <li>3. Hardware and gaskets shall be inspected annually, and any parts found to be damaged or inoperative shall be replaced;</li> <li>4. Tin clad and Kalamein doors shall be inspected regularly for dry rot;</li> <li>5. A written record shall be maintained and shall be made available to the authority having jurisdiction; and</li> <li>6. Records shall be maintained for not less than 3 years.</li> </ol> <p>5.2.1 (NFPA 105)</p>	K S761		