### K 000 INITIAL COMMENTS

A Life Safety Code (LSC) survey was conducted as per The Code of Federal Register at 42CFR 483.70(a); using the 2000 Existing Health Care section of the LSC and its referenced publications. In the exit conference all deficiencies noted were discussed with administration.

Stories: One
Construction Type-V (111)
Constructed: 1989
Fully Sprinkled - Yes
At time of survey the:
Certified Beds: Medicare/Medicaid - 100
Census - 74
Certified Beds: Medicaid only-100
Census - 74

The requirement at 42 CFR, Subpart 483.70(a) is NOT MET as evidence by:

#### K 062 NFPA 101 LIFE SAFETY CODE STANDARD

Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5

This STANDARD is not met as evidenced by:

Based on observations and review with staff on 2/4/2015 at approximately 9:30 AM onward, the following deficiencies were noted:

- The facility sprinkler system was noncompliant.

Brian Center Shamrock acknowledges receipt of the Statement of Deficiencies and purposes this Plan of Correction to the extent that the summary of findings is factually correct in order to maintain compliance with applicable rules and laws.
<table>
<thead>
<tr>
<th>ID</th>
<th>Provider's Plan of Correction (Each Corrective Action Should Be Cross-referenced to the Appropriate Deficiency)</th>
</tr>
</thead>
<tbody>
<tr>
<td>K 062</td>
<td>Correction for the alleged deficiency noted as &quot;Sprinkler heads in resident room 201 are recalled and were not replaced.&quot; Sprinkler Contractor was contacted immediately to replace those affected sprinkler heads. Sprinkler contractor also performed an audit of the remainder of the facility to identify and replace any others identified. This replacement was completed on 2/12/2015. The Maintenance Director will continue with observations to detect any other like sprinkler heads and have them replaced upon discovery. All findings and results will be presented to and discussed during the facility monthly Safety Committee meeting for the next three months.</td>
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### K 062

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### K 144

**NFPA 101 LIFE SAFETY CODE STANDARD**

Generators are inspected weekly and exercised under load for 30 minutes per month in accordance with NFPA 99. 3.4.4.1.

This STANDARD is not met as evidenced by: Based on observations on 2/4/2015 at approximately 9:30 AM onward, the following deficiencies were noted:

The facility generator did not crank, and transfer power within the required 10 seconds.

The generator did crank, and transfer power to the facility’s emergency circuit in approximately one minute and forty-five seconds.

The deficiency could leave the the facility without its emergency circuitry beyond the required 10 seconds.

Ref: NFPA 99. 3.4.4.1.

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Correction for the alleged deficiency noted as "The facility generator did not crank, and transfer power within the required 10 seconds":

Immediately contacted generator service to diagnose the generator issue and repair. Timer was readjusted and checked for proper operation. The Maintenance Director will continue with regular weekly checks for the next 4 weeks by simulating power loss and running the generator under load in lieu of no load testing to test for continued reliability. All findings and results will be presented to and discussed during the facility Safety Committee meetings for the next three months with continued reviews and critique quarterly.
<table>
<thead>
<tr>
<th>ID</th>
<th>PREFIX</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES</th>
<th>ID</th>
<th>PREFIX</th>
<th>TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION</th>
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</thead>
<tbody>
<tr>
<td>K 144</td>
<td>Continued From page 3</td>
<td>K 144</td>
<td>thereafter until the next annual survey.</td>
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