

Department of Veterans Affairs State Veterans Home Survey Report

This survey report and the information contained herein, resulted from the State Veterans Home (SVH) Survey as a Summary Statement of Deficiencies. (Each Deficiency Must be Preceded by Full Regulatory or applicable Life Safety Code Identifying Information.) Title 38 Code of Federal Regulations Part 51 is applied for SVHs applicable by level of care.

General Information:

Facility Name: Minnesota Veterans Home – Silver Bay

Location: 56 Outer Drive, Silver Bay, MN 55614

Onsite / Virtual: Onsite

Dates of Survey: 7/9/24 – 7/11/24

NH / DOM / ADHC: NH

Survey Class: Annual

Total Available Beds: 83

Census on First Day of Survey: 50

VA Regulation Deficiency	Findings
	<p>Initial Comments:</p> <p>A VA Annual Survey was conducted from July 9, 2024, through July 11, 2024, at the Minnesota Veterans Home – Silver Bay. The survey revealed the facility was not in compliance with Title 38 CFR Part 51 Federal Requirements for State Veterans Homes.</p>
<p>§ 51.200 (a) Life safety from fire. (a) Life safety from fire. The facility must meet the applicable provisions of NFPA 101, Life Safety Code and NFPA 99, Health Care Facilities Code.</p> <p>Level of Harm – No Actual Harm, with potential for more than minimal harm</p> <p>Residents Affected – Many</p>	<p><u>Smoke Barriers and Sprinklers</u></p> <ol style="list-style-type: none">1. Based on interviews and record review, the facility failed to test and inspect the fire alarm in accordance with the code. The deficient practice affected 12 of 12 smoke compartments, staff, and all residents. The facility had the capacity for 83 beds with a census of 50 on the day of survey. <p>The findings include:</p> <p>Record review, on 7/9/24, at 9:44 a.m., of the fire alarm inspection reports for the 12-month period prior to the survey revealed there was no documentation of a semi-annual visual inspection of the smoke detectors, as required by Table 14.3.1 of NFPA 72, National Fire Alarm and Signaling Code. The last inspections of the smoke detectors were during the annual inspection of the fire alarm on 6/27/23, and 6/21/22.</p>

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	<p>An interview with Maintenance Staff A, on 7/9/24, at 9:44 a.m., revealed the facility staff was not aware of the requirements for semi-annual visual inspections for the smoke detectors, and that only annual inspections were taking place at the facility.</p> <p>Record review, on 7/9/24, at 9:46 a.m., of the fire alarm inspection report, dated 6/27/23, revealed there was no indication of a semiannual discharge test for the back-up batteries either six (6) months prior to the inspection or six (6) months after the inspection, as required by Table 14.4.5 of NFPA 72, National Fire Alarm and Signaling Code. The facility had no other documentation of a discharge test for the back-up batteries.</p> <p>An interview with Maintenance Staff A, on 7/9/24, at 9:47 a.m., revealed the facility staff was not aware of the requirement to conduct a discharge test for the back-up batteries on the fire alarm system semiannually, and that the facility only conducted annual inspection and testing of the fire alarm.</p> <p>The census of 50 was verified by Administrative Staff A on 7/9/24, at 9:30 a.m. The findings were acknowledged by Administrative Staff A and verified by Maintenance Staff A during the exit conference on 7/10/24, at 3:30 p.m.</p> <p>Actual NFPA Standard: NFPA 101, Life Safety Code (2012) 19.3.4.1 General. Health care occupancies shall be provided with a fire alarm system in accordance with Section 9.6. 9.6 Fire Detection, Alarm, and Communications Systems. 9.6.1* General. 9.6.1.1 The provisions of Section 9.6 shall apply only where specifically required by another section of this Code. 9.6.1.2 Fire detection, alarm, and communications systems installed to make use of an alternative permitted by this Code shall be considered required systems and shall meet the provisions of this Code applicable to required systems. 9.6.1.3 A fire alarm system required for life safety shall be installed, tested, and maintained in accordance with the applicable requirements of NFPA 70, National Electrical Code, and NFPA 72, National Fire Alarm and Signaling Code, unless it is an approved existing installation, which shall be permitted to be continued in use. 9.6.1.4 All systems and components shall be approved for the purpose for which they are installed. 9.6.1.5* To ensure operational integrity, the fire alarm system shall have an approved maintenance and testing program complying with the applicable requirements of NFPA 70, National Electrical Code, and NFPA 72, National Fire Alarm and Signaling Code. 4.6.12 Maintenance, Inspection, and Testing.</p>
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	<p>4.6.12.1 Whenever or wherever any device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or any other feature is required for compliance with the provisions of this Code, such device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or other feature shall thereafter be continuously maintained. Maintenance shall be provided in accordance with applicable NFPA requirements or requirements developed as part of a performance-based design, or as directed by the authority having jurisdiction.</p> <p>4.6.12.2 No existing life safety feature shall be removed or reduced where such feature is a requirement for new construction.</p> <p>4.6.12.3* Existing life safety features obvious to the public, if not required by the Code, shall be either maintained or removed.</p> <p>4.6.12.4 Any device, equipment, system, condition, arrangement, level of protection, fire-resistive construction, or any other feature requiring periodic testing, inspection, or operation to ensure its maintenance shall be tested, inspected, or operated as specified elsewhere in this Code or as directed by the authority having jurisdiction.</p> <p>10.2 Purpose. The purpose of fire alarm and signaling systems shall be primarily to provide notification of alarm, supervisory, and trouble conditions; to alert the occupants; to summon aid; and to control emergency control functions.</p> <p>10.3 Equipment.</p> <p>10.3.1 Equipment constructed and installed in conformity with this Code shall be listed for the purpose for which it is used.</p> <p>Actual NFPA Standard: NFPA 72, National Fire Alarm and Signaling Code (2010)</p> <p>14.4.2* Test Methods.</p> <p>14.4.2.1* At the request of the authority having jurisdiction, the central station facility installation shall be inspected for complete information regarding the central station system, including specifications, wiring diagrams, and floor plans that have been submitted for approval prior to installation of equipment and wiring.</p> <p>14.4.2.2* Systems and associated equipment shall be tested according to Table 14.4.2.2.</p> <p>14.3 Inspection.</p> <p>14.3.1* Unless otherwise permitted by 14.3.2 visual inspections shall be performed in accordance with the schedules in Table 14.3.1 or more often if required by the authority having jurisdiction.</p> <p>14.4.5* Testing Frequency. Unless otherwise permitted by other sections of this Code, testing shall be performed in accordance with the schedules in Table 14.4.5, or more often if required by the authority having jurisdiction.</p> <p>Table 14.3.1 Visual Inspection Frequencies</p>
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Table 14.4.2.2 Testing Schedule Frequencies

2. Based on observation and interview, the facility failed to properly install and maintain equipment protected by the kitchen hood extinguishing system. The deficient practice affected one (1) of 12 smoke compartments, staff, and no residents. The facility had a capacity of 83 beds with a census of 50 on the day of the survey.

The findings include:

Observation during the building inspection tour, on 7/10/24, at 3:23 p.m., revealed the wheeled, gas-fired, six (6) burner stove located on the cooking line in the [LOCATION] was not provided with an approved method that would ensure that the appliance was returned to an approved design location after it had been moved for maintenance and cleaning, as required by Section 12.1.2.3 and 12.1.2.3.1 of NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations. Additional observation revealed it did have a cabling system in place that met the NFPA 54 requirement.

An interview, on 7/10/24, at 3:23 p.m., with Maintenance Staff A revealed the facility staff was not aware an approved method should be provided to ensure the appliances were returned to an approved design location after maintenance or cleaning.

The census of 50 was verified by Administrative Staff A on 7/9/24, at 9:30 a.m. The findings were acknowledged by Administrative Staff A and verified by Maintenance Staff A during the exit conference on 7/10/24, at 3:30 p.m.

Actual NFPA Standard: NFPA 101, Life Safety Code (2012) 19.3.2.5 Cooking Facilities.

19.3.2.5.1 Cooking facilities shall be protected in accordance with 9.2.3, unless otherwise permitted by 19.3.2.5.2, 19.3.2.5.3, or 19.3.2.5.4.

19.3.2.5.2* Where residential cooking equipment is used for food warming or limited cooking, the equipment shall not be required to be protected in accordance with 9.2.3, and the presence of the equipment shall not require the area to be protected as a hazardous area.

9.2.3 Commercial Cooking Equipment. Commercial cooking equipment shall be in accordance with NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking

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	<p>Operations, unless such installations are approved existing installations, which shall be permitted to be continued in service.</p> <p>Actual NFPA Standard: NFPA 96, Standard for Ventilation Control and Fire Protection of Commercial Cooking Operations (2011)</p> <p>12.1.2 Installation.</p> <p>12.1.2.1 All listed appliances shall be installed in accordance with the terms of their listings and the manufacturer's instructions.</p> <p>12.1.2.2* Cooking appliances requiring protection shall not be moved, modified, or rearranged without prior re-evaluation of the fire-extinguishing system by the system installer or servicing agent, unless otherwise allowed by the design of the fire extinguishing system.</p> <p>12.1.2.3 The fire-extinguishing system shall not require reevaluation where the cooking appliances are moved for the purposes of maintenance and cleaning, provided the appliances are returned to approved design location prior to cooking operations, and any disconnected fire-extinguishing system nozzles attached to the appliances are reconnected in accordance with the manufacturer's listed design manual.</p> <p>12.1.2.3.1 An approved method shall be provided that will ensure that the appliance is returned to an approved design location.</p> <p><u>Fire Safety and Operations</u></p> <p>3. Based on interview and record review, the facility failed to conduct all required fire drills. The deficient practice affected 12 of 12 smoke compartments, staff, and all residents. The facility had a capacity for 83 beds with a census of 50 on the first day of the survey.</p> <p>The findings include:</p> <p>Record review, on 7/9/24, at 11:30 a.m., of the fire drill reports from the 12 months preceding the survey, revealed the facility had not conducted a fire drill for each shift and for each quarter, as required by Section 19.7.1.6 of NFPA 101, Life Safety Code.</p> <p>The missing fire drills included:</p> <p>For Calendar Year 2023:</p> <ul style="list-style-type: none">a.) First shift- third quarterb.) Third shift- third quarterc.) Third shift- fourth quarter
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	<p>Additional record review revealed no other fire drills were conducted during these shifts in these quarters.</p> <p>An interview with Maintenance Staff A, on 7/9/24, at 11:45 a.m., revealed the facility staff was not aware the fire drills were missing for those quarters and shifts.</p> <p>The census of 50 was verified by Administrative Staff A on 7/9/24, at 9:30 a.m. The findings were acknowledged by Administrative Staff A and verified by Maintenance Staff A during the exit conference on 7/10/24, at 3:30 p.m.</p> <p>Actual NFPA Standard: NFPA 101 (2012) Life Safety Code 19.7.1.4* Fire drills in health care occupancies shall include the transmission of a fire alarm signal and simulation of emergency fire conditions. 19.7.1.5 Infirm, or bedridden patients shall not be required to be moved during drills to safe areas or to the exterior of the building. 19.7.1.6 Drills shall be conducted quarterly on each shift to familiarize facility personnel (nurses, interns, maintenance engineers, and administrative staff) with the signals and emergency action required under varied conditions. 19.7.1.7 When drills are conducted between 9:00 p.m. and 6:00 a.m. (2100 hours and 0600 hours), a coded announcement shall be permitted to be used instead of audible alarms.</p>
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